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(Requestor's Name)				
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SECKETARY OF STATE OF AN AMASSEE, FLORIDA

* +1.03

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Sai	ntoni, Inc.	_	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
•			
England on one	ind and an (1) and the art	: 16:	111- <i>C</i>
Enclosed are an ong	ginal and one (1) copy of the art	reles of incorporation and	i a check for:
□ \$70.0ō	≰] \$78.75	□ \$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
			Status
		ADDITIONAL CO	PPY REQUIRED
FROM:	Claudia Santoni		
	Name (Printed or typed)		
	20 Island Avenue #1405		
		Address	
·	Miami Beach FI 33139		
	City,	State & Zip	
	305-538-9820		
	Daytime 7	elenhone number	

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

03 MAR 25 PM 2: 06

SECRETARY OF STATE TALL AHASSEE, FLORIDA

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

Santoni, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

20 Island Avenue #1405 Miami Beach Fi 33139

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business Services

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s): Claudia Santoni, President 20 Island Avenue #1405 Miami Beach Fl 33139

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Claudia Santoni 20 Island Avenue #1405 Miami Beach FI 33139

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Claudia Santoni 20 Island Avenue #1405 Miami Beach Fl 33139

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent Date

Olarch Scarto 3/23/03

Signature/Incorporator Date

Claudia Santoni