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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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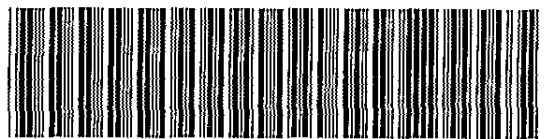
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

American Innovative Business Associates, Corp.

SUBJECT: _____
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: _____
Name (Printed or typed)

P.O. Box 33616

Address

Palm Beach Gardens, FL 33420-3616

City, State & Zip

954-918-4813

Daytime Telephone 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)

ARTICLE I NAME

The name of the corporation shall be:

American Innovative Business Associates, Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**P.O. Box 33616
Palm Beach Gardens, FL 33420-3616**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide business services

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

**Anna Brown-Aviles, President
561 SE 13 Street, Suite 206,
Dania Beach, FL 33004**

ARTICLE VI REGISTERED AGENT

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

**Michael Aviles
561 SE 13 Street, Suite 206,
Dania Beach, FL 33004**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**Anna Brown-Aviles, President
561 SE 13 Street, Suite 206,
Dania Beach, FL 33004**

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

9/15/03

Date



Signature/Incorporator

9/15/03

Date

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TALLAHASSEE, FLORIDA