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TRANSMITTAL LETTER

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

SUBJECT: Amarilis Corporation, Inc.				
sed are an origina	l and one (1) copy of the articles	of incorporation and	i a	
□ \$78.75 Filing Fee & Certificate Status	X \$78.75 Filing Fee & Certificate Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status		
	ADDITIONAL COPY REQUIRED			
	Name (Printed or typed) 370 Everglades Blvd. N Address Naples, FL 34120 City, State & Zip 239) 304-0298	ALLATRUS LONDA	O4 FEB -2 PN 1:23	
	sed are an origina \$78.75 Filing Fee & Certificate Status	sed are an original and one (1) copy of the articles \$78.75	Sed are an original and one (1) copy of the articles of incorporation and \$78.75	sed are an original and one (1) copy of the articles of incorporation and a \$78.75

ARTICLES OF INCORPORATION

The underside incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

AMARILIS CORPORATION, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1370 EVERGLADES BLVD. N.

NAPLES, FL 34120

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: ONE HUNDRED(100) SHARES

ARTICLE IV INITIAL REGISTER AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

CARLOS M. ANTUNEZ 1370 EVERGLADES BLVD. N. NAPLES, FL 34120

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s), address(es) and title(s):

CARLOS M. ANTUNEZ{PRESIDENT}
1370 EVERGLADES BLVD. N.
NAPLES, FL 34120

ARTICLE VI INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

CARLOS M. ANTUNEZ 1370 EVERGLADES BLVD. N. NAPLES, FL 34120

Signature/Incorporator

Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date