

P04000064386

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

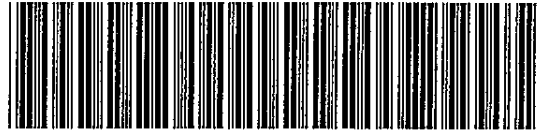
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/13/04--01105--001 **70.00

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04 APR 13 PM 5:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: LLAMACUBA, INC
(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: LLAMACUBA, INC
Name (Printed or typed)

5948 W. 16TH AVE
Address

HIALEAH, FL 33012
City, State & Zip

786 553 2643
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:

LLAMACUBA, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5948 W. 16TH AVE
HIALEAH, FL 33012

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INTERNATIONAL CALLS

ARTICLE IV SHARES

The number of shares of stock is:

20

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ORELVIS MARTINEZ (P)

JENNY M MOYA (VP)

ARTICLE VI REGISTERED AGENT

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


ORELVIS MARTINEZ (P)
10950 SW 64TH STREET
MIAMI, FL 33173

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JENNY M MOYA (VP)
10950 SW 64TH STREET
MIAMI, FL 33173

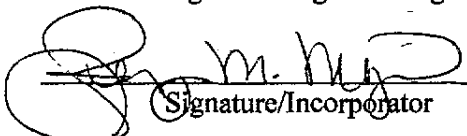
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

04-10-04

Date



Signature/Incorporator

4/10/04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA