

POS 000019486

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

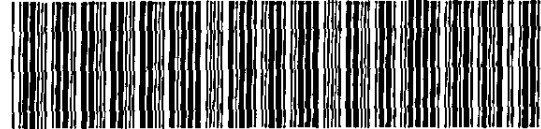
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 JAN 31 AM 9:37
SECRET
TALLAHASSEE FL 32310A

11/2/05

TRANSMITTAL LETTER

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

SUBJECT: ANGEL M. RIVERA, 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
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: ANGEL M. RIVERA

Name (Printed or typed)

174 PINE AVENUE

Address

WEST PALM BEACH, FL 33413

City, State & Zip

561 667 1065

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:

ANGEL M. RIVERA, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

174 PINE AVENUE, WEST PALM BEACH, FL 33413

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSTALLATION AND SALES KITCHEN CABINETS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ANGEL M. RIVERA, PRESIDENT, 174 PINE AVENUE, WEST PALM BEACH, 33413

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

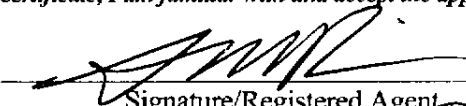
ANGEL M. RIVERA, 174 PINE AVENUE, WEST PALM BEACH, FL 33413

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

AURA E. GOODMAN, 4923B SOUTHERN BLVD. WEST PALM BEACH, FL 33415

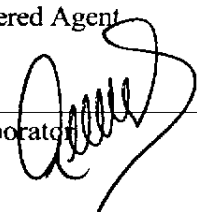
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

01/27/2005

Date



Signature/Incorporator

01/27/2005

Date

FILED

05 JAN 31 AM 9:37

SECRETARY OF STATE
TALLAHASSEE FLORIDA