P05000097649

(Requestor's Name)			
(Address)			
(Address)			
(\au_000)	,		
(Ĉity/Stat	e/Zip/Phone #)		
[] [····-		
PICK-UP	WAIT MAIL		
(Business	s Entity Name)		
,	•		
Dogumo	nt Number)		
(Docume	nt Number)		
Certified Copies	Certificates of Status		
Special Instructions to Filing	Officer		
Special manufactions to Filing	Officer.		

Office Use Only



000055800970

06/07/05--01021--002 **70.00

FILED

05 JUL 12 MI 8:55

SECKETARY OF STATE
TALL ALIASSEE FOR DA

c.3.713

TRANSMITTAL LETTER

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

SUBJECT:	AmazonDesign			
	(PROPOSED CORPORA)	TE NAME - MUST INCLI	DDE SUFFIX)	
Enclosed are an original	ginal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00	\$ 78.75	3 \$78.75	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of Status	
		ADDITIONAL CO		
	1 Jan Xad		Aaron	
FROM:	Lourdes Andr	ed Chavez	· / hous	
	2300 Madis	on Street 1	N= 107	
	7	Address	-	
	uu (ti			
	Hollywood, Fin	alda 330	320	
City, State & Zip				

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 7, 2005

LOURDES ANDREA CLAVEZ APUCUSI 2300 MADISON ST., STE. 107 HOLLYWOOD, FL 33020

SUBJECT: AMAZON DESIGN CORPORATION

Ref. Number: W05000028219

We have received your document for AMAZON DESIGN CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis Document Specialist New Filings Section

Letter Number: 705A00040017

TRANSMITTAL LETTER

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

SUBJECT:	rchiDx Cons	ultants Co	rp.
Enclosed are an ori	ginal and one (1) copy of the art	TE NAME - MUST INCL	
፟ \$70.00 Filing Fee	— · ·	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM:	Lourdes Andre Name 2300 Madison		
	Hollywood /Flo	rida 33020 , State & Zip 56-8612)

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

Daytime Telephone number

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:	• .
ArchiDx Consultants Corp.	95 TALL
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 2300 Madison Street N= 107 Hollywood / Florida 33020_USA	JUL 12 M 8: 55 RETARY OF STATE AILASSEE, FLORIDA
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	8: 55 TATE ORIDA
Architect Design and Construction Consultants	
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):	
Lourdes Andrea Chávez Apucusi	
2300 Madison Street No 107	
Hollywood/Florida 33020-USA	
President	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the registere	d agent is:
Lourdes Andrea Chaver Apucusi 2300 Madison Street No 107	
Hollywood /Florida 33020 -USA	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	ve.
Lourdes Andrea Chavez Apucusi	
2300 Madison Street Nº 107	
Holly wood / Florida 33020 - USA ***********************************	· **********
Having been named as registered agent to accept service of process for the above stated corporate certificate, I am familiar with and accept the appointment as registered agent and agree to act in the	tion at the place designated in this iis capacity
for love 0	7-08-05
Signature/Registered Agent	Date

Signature/Incorporator

O + - 08 - 05

Date