Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000182295 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from the page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839

Fax Number : (305)716-0346

## FLORIDA PROFIT CORPORATION OR P.A.

WORK 4 ME, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing

Public Access Help

5H 7/29/2005 11:32 AM



#### FLORIDA DEPARTMENT OF STATE Clenda E. Hood Secretary of State

August 1, 2005

FAS-T CORP. AGENTS, INC.

SUBJECT: WORK 4 ME, INC.

REF: W05000036149

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

Name conflict with P95000036418, WORKS FOR ME, INC.

If you have any further quastions concerning your document, please call (850) 245-6933.

Dale White Document Specialist New Filings Section FAX Aud. #: H05000182295 Letter Number: 605A00049554

# ARTICLES OF INCORPORATION

ANIVENEAL. INC.

STATE OF THE PARTY The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### <u>ARTICLE I NAME</u>

The name of the corporation shall be:

ANIVENZAL, INC.

The principal place of business of this corporation shall be:

1030 S.W. 87th Avenue Ste. B-8 Mismi, Fl. 33174

#### ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is:

1,000 SHARESOF COMMON STOCK AT \$1.00 each.

### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

#### ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

Ans M. Venzal

1030 S.W. 87th Avenue Ste. #B-8 Miami, Fl. 33174

B05000182295 3

## ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

Ana M. Venzal 1030 S.W. 87th Avenue Ste #B-8 Miami, FL 33174

July	2005.	on this,26±b	da
<u> </u>	2005.		
		Signature(s) of Ir	corporate
		CAS 1	// (:
,		- Charles	veg en
	•		<del></del>

# CERTIFICATE OF DESIGNATION REGISTERED AGENTY REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

<ol> <li>The name of the corpora</li> </ol>	auon:
---	-------

ANIVENZAL, INC.

2. The name and address of the registered agent and office is:

Ana M. Venzal

1030 S.W. 87th Avenue Ste #B-8

(P.O. BOX NOT ACCEPTABLE)

Miami, FL 33174

(CITY/STATE/ZIP)

Signature

Title President

Date July 26, 2005

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURÈ

DATE July 26, 2005

HO5000182295 3