

PO5000130687

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

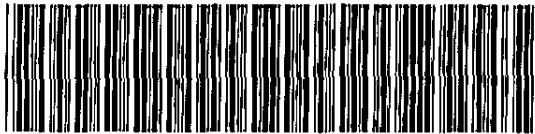
(Business Entity Name)

(Document Number)

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## COVER LETTER

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

SUBJECT: LIBRERIA ESPIRITU SANTO, 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: NILDA M. FONSECA  
Name (Printed or typed)

33 S. SEMORAN BLVD.  
Address

ORLANDO, FL 32807  
City, State & Zip

(407) 282-1001 / (407) 927-0567  
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:

LIBRERIA ESPIRITU SANTO, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

33 S. SEMORAN BLVD.  
ORLANDO, FL 32807

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To sell religious books and articles

### 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):

NILDA M. FONSECA, OWNER/PRESIDENT  
362 WINDMEADOWS ST.  
ALTAMONTE SPRINGS, FL 32701

### ARTICLE VI REGISTERED AGENT

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

NILDA M. FONSECA  
362 WINDMEADOWS ST.  
ALTAMONTE SPRINGS, FL 32701

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

NILDA M. FONSECA  
362 WINDMEADOWS ST.  
ALTAMONTE SPRINGS, FL 32701

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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

Nilda M. Fonseca

Signature/Registered Agent

Nilda M. Fonseca

Signature/Incorporator

9/13/05  
Date

9/13/05  
Date