

PD5000135850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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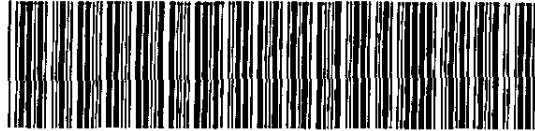
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 OCT -4 PM 2:59
CLERK OF COURT
FALL ARIASSEE, FLORIDA

2 Burch OCT 05 2005

COVER LETTER

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

SUBJECT: THE AMOR GROUP, 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: LORRAINE LAGANA
Name (Printed or typed)

206 FLAGLER AVENUE
Address

NEW SMYRNA BEACH, FLORIDA 32169
City, State & Zip

386-424-9908
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:

THE AMOR GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

513 OLD MINORCAN TRAIL
NEW SMYRNA BEACH, FLORIDA 32169

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HEALTH CARE PRODUCTS

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):

JANICE KNUTSON - 513 OLD MINORCAN TRAIL, NEW SMYRNA BEACH, FL 32169
PRESIDENT
MEL GOMEZ - 513 OLD MINORCAN TRAIL, NEW SMYRNA BEACH, FL 32169
VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

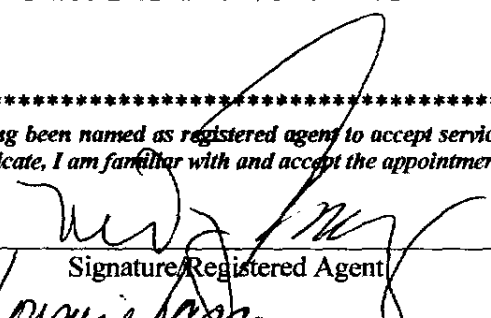
MEL GOMEZ - 513 OLD MINORCAN TRAIL, NEW SMYRNA BEACH, FL 32169

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LORRAINE LAGANA - 206 FLAGLER AVENUE, NEW SMYRNA BEACH, FL 32169

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



Signature/Incorporator

SEPT 28, 2005

Date

SEPT 28, 2005

Date

FILED
05 OCT -4 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA