

POL0000022322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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(Business Entity Name)

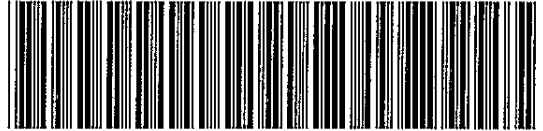
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Certificates of Status \_\_\_\_\_

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2006 FEB -9 PM 4:00  
TALLAHASSEE, FLORIDA

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# TRANSMITTAL LETTER

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2006 FEB -9 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

SUBJECT:

ITAL BAGS ITALIA INC

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM:

G.D.G. TAX SERVICE CORP

Name (printed or typed)

1082 SW 134 CT

Address

MIAMI FL 33184

City, State & Zip

305-223-7250

Daytime Telephone number

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

## **ARTICLES OF INCORPORATION**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.

### **ARTICLE I**

#### **NAME**

The name of the corporation shall be ITALBAGS ITALIA INC.

### **ARTICLE II**

#### **DURATION**

This corporation shall have a perpetual existence, unless dissolved according to Law.

### **ARTICLE III**

#### **PURPOSE**

This corporation is organized for the purpose of transacting any or all business for which corporations may be incorporated under the Florida General Corporation Act.

### **ARTICLE IV**

#### **CAPITAL STOCK**

This corporation is authorized to issue Five hundred ( 500 ) shares of One Dollar ( 1.00 ) par value common stock, which shall be designated "Common Shares".

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2005 FEB -9 PM 4:00  
CLERK OF DISTRICT COURT  
JAIL AMASSEE FLORIDA

## ***ARTICLE V***

### ***INITIAL REGISTERED OFFICE AND AGENT***

The address of the initial registered office of this corporation is 777 N W 72 AVE  
# 2040 MIAMI, Florida, 33126 , and the name of the initial  
registered agent of the corporation at that address is STEPHANIE VARGAS

## ***ARTICLE VI***

### ***INITIAL BOARD OF DIRECTORS***

This corporation shall have ( 1 ) ( ONE ) directors (s) initially. The number of  
directors may be either increased or diminished from time to time by the by-laws, but  
shall never be less than one. The name and address of the initial director of this  
corporation is:

STEPHANIE VARGAS  
777 N W 72 AVE # 2040  
MIAMI, FL 33126

**ARTICLE VII**  
**INDEMNIFICATION**

To the full extent permitted by law, the corporation shall indemnify each person made or threatened to be made a party to any threatened, pending or completed action, suit, or proceeding, whether civil, criminal, administrative or investigative (including, one in the right of the corporation to procure a judgment in its favor) by reason of the fact that he or his testator or interstate, is or was a director, officer, employee or agent of the corporation or served any other corporation, partnership, joint venture, trust, or other enterprise in any capacity, at the request of the corporation.

**ARTICLE VIII**  
**INCORPORATED**

The name and address of the person signing these articles is. —

STEPHANIE VARGAS  
777 N W 72 AVE # 2040  
MIAMI, FL 33126

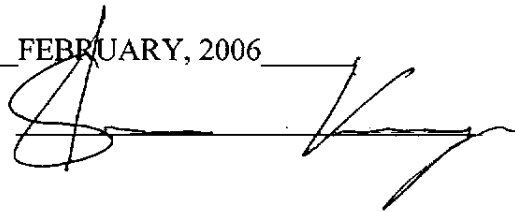
**ARTICLE IV**  
**OFFICERS**

The officers of the corporation shall be as follows:

STEPHANIE VARGAS

President

IS WITNESS WHERE OF, The undersigned subscriber has executed these Articles of  
incorporation on this 6 day of FEBRUARY, 2006



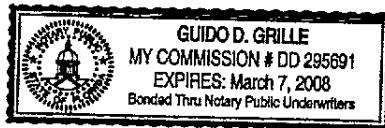
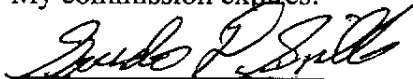
STATE OF FLORIDA

COUNTY OF DADE

BEFORE ME, a notary public authorized to take acknowledgments in the  
state and county set forth above personally appeared STEPHANIE VARGAS  
known to me and known by me to be the person who executed the foregoing Articles of  
Incorporation, and he acknowledged before me that he executed those Articles of  
Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my  
official seal, in the state and county aforesaid this 6 day of           
FEBRUARY, 2006.

My commission expires:



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2006 FEB -9 PM 4: 00

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

CERTIFICATE DESIGNATING PLACE OF BUSINESS OF DOMICILE FOR THE  
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM  
PROCESS MAY BE SERVED.

In pursuance of chapter 48.091 Florida Status, the following is submitted, in compliance  
with said Act:

First – That ITALBAGS ITALIA INC.

Desiring to organize under the laws of the State of Florida with its principal office, at

777 N W 72 AVE # 2040 City of MIAMI, FL 33126

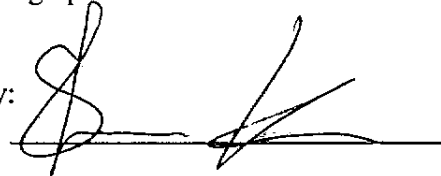
County of Dade, State of Florida, has named STEPHANIE VARGAS

Located at 777 N W 72 AVE # 2040 City of MIAMI, FL 33126

County of Dade, State of Florida, as its agent to accept service of process within this  
state.

Having been named to accept service of process of the above Stated corporation, at  
place designated in this certificate, I hereby accept to act in this capacity, and agree to  
comply with the provision of said Act relative to keeping open said office.

By:

A handwritten signature in black ink, appearing to be 'Stephanie Vargas', written over a horizontal line.