

P060060571 42

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

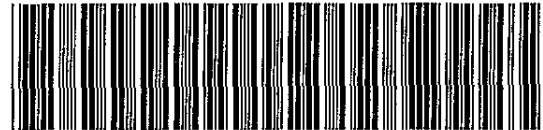
Certified Copies \_\_\_\_\_

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

Special Instructions to Filing Officer:

NO COPY

Office Use Only



300069590323

04/06/06--01035--008 \*\*78.75

CB 4-21-06  
1-11-512

## COVER LETTER

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

SUBJECT: Ivalice 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: Algeri M Cruz  
Name (Printed or typed)

204 Miramar IN  
Address

Pga FL 33410  
City, State & Zip

(561) 691-8949  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 7, 2006

ALGERI M. CRUZ  
204 MIRAMAR LN  
PGA, FL 33410

SUBJECT: IVALICE INC.  
Ref. Number: W06000016512

We have received your document for IVALICE INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please use complete spelling of the city name in the articles.,

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) 245-6925.

Cynthia Blalock  
Document Specialist  
New Filing Section

Letter Number: 106A00023565

**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:

Ivalice, Inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

204 Miramar Lane  
Palm Beach Gardens, FL, 33410

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

All legal purposes

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Algeri Cruz  
204 Miramar Lane  
Palm Beach Gardens, FL 33410

**ARTICLE VI REGISTERED AGENT**

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

Algeri Cruz  
204 Miramar Lane, Palm Beach Gardens, FL 33410

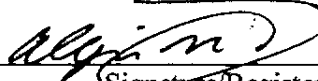
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Algeri Cruz  
204 miramar Lane, Palm Beach Gardens, FL, 33410

\*\*\*\*\*

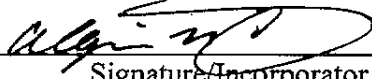
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

04-17-06

Date



Signature/Incorporator

04-17-06

Date