

PO6000096185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

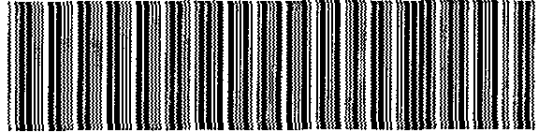
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/21/06-01058-003 **78.75

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STATE

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COVER LETTER

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

SUBJECT: BEMANSON VENTURES 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: AUSTIN IJEOMA
Name (Printed or typed)

18800 N.W 2ND AVE Suite K-219
Address

MIAMI - FL. 33169
City, State & Zip

305 - 493 - 3885
Daytime Telephone number

PLS FAX COPIES TO ME
FAX = (305) 652 - 0224

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:

GEMANSON VENTURES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

18800 N W 2ND AVE
MIAMI FL. 33169

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFIT

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

EUGENE AMANAMBU
5453N W 169 STREET
MIAMI FL, 33055
PRESIDENT

ARTICLE VI REGISTERED AGENT

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

AUSTIN IJEOMA
1280 N E 110 ST.
MIAMI FL, 33162

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

EUGENE AMANAMBU
5453 N.W. 169 ST
MIAMI FL. 33055

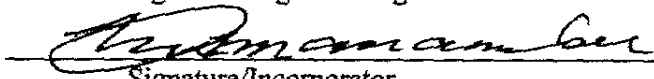
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

07-20-06

Date



Signature/Incorporator

07-20-2006

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA