

P07000021986

(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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CLERK OF STATE
TALLAHASSEE, FLORIDA

J. Shivers FEB 19 2007

COVER LETTER

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

SUBJECT: AMIR RIVERS 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: AMIR RIVERS
Name (Printed or typed)

12922 BRANT TREE DR.
Address

RIVERVIEW, FL 33569
City, State & Zip

813-318-1488
Daytime Telephone number

RECEIVED
TALLAHASSEE, FLORIDA

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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:

AMIR RIVERS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

12922 BRANT TREE DR.

RIVERVIEW, FL 33569

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INVESTMENTS AND BUSINESS MANAGEMENT SERVICES

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):

AMIR RIVERS

12922 BRANT TREE DR.

RIVERVIEW, FL 33569

ARTICLE VI REGISTERED AGENT

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

AMIR RIVERS

12922 BRANT TREE DR.

RIVERVIEW, FL 33569

ARTICLE VII INCORPORATOR

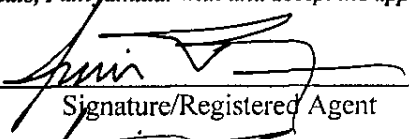
The name and address of the Incorporator is:

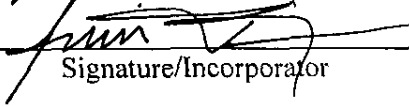
AMIR RIVERS

12922 BRANT TREE DR.

RIVERVIEW, FL 33569

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

2/7/07

Date

2/7/07

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA