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(Re	equestor's Name)		
(Ad	dress)		
(Address)			
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
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Certified Copies	Certificates	of Status	
	-		
Special Instructions to	Filing Officer:		

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cg. 7-27

COVER LETTER

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

SUBJECT:	Angel Hwancial Solutions, I (PROPOSED CORPORA)	N(. E NAME – <u>MUST INCLI</u>	UDE SUFFIX)	, was a
England are as on	singland one (1) some after out	la ofinancia and	a charle Com	
Filing Fee	ginal and one (1) copy of the artic \$78.75 Filing Fee & Certificate of Status	State of incorporation and \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	MARCUS A PRINCE Name (Printed or typed)		1. g. 11 &
	20641 NN 17th Ave, 302	ddress	<u>ئىسى خشى تە</u>	
	MINMI, FL 3305L City, S	State & Zip	<u> </u>	والمناج المناسب
	954 (96-4144) Davime Te	lenhone number		<u> </u>

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



July 16, 2007

MARCUS A PRINCE 20641 NW 17TH AVE 302 MIAMI, FL 33056

SUBJECT: ANGEL FINANCIAL SOLUTIONS, INC.

Ref. Number: W07000033759

We have received your document for ANGEL FINANCIAL SOLUTIONS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from on existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles of incorporation so that we may complete the filing process.

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) 245-6879.

Letter Number: 807A00044853

Ruby Dunlap Regulatory Specialist New Filing Section

ARTICL	FS	OF	INCOR	PORA	TION
	4.50	\sim			1 1 1 1 7 1 7

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

	ARTICLE	I	NAME
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The name of the corporation shall be:

ANGEL FINANCIAL SOLUTIONS, INC.

2007 JUL 26 AMII: 10

TALLAHASSEE. FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2983 NORTH POWERLINE ROAD

POMPANO BEACH, FL 33069

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAHFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

SAMUEL ADEBOGA

EDVARDO ARCHER

MARCUS APRINCE

President

SECRETARY

YICE PRESIDENT

2983 N. POWERLINE RD.

2983 N, POWERLINE NO.

2983 N. POWERLINE PD.

POMPANO BEACH, FL 33069

POMPANO BEACH, FL 33619

POMPANO BEACH, FL 33069

<u>ARTICLE VI REGISTERED AGENT</u>

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

EDVARDO ARCHER

2993 N. POWERLINE RD.

POMPANO BEACH, FL 3369

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

EDVARDO ARCHER

2983 N. PONERUNE RD.

POMPANO BEACH, FL 33069

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 7/3/07

Signature/Registered Agent Date

1/3/07

Signature/Incorporator Date