

P07000128604

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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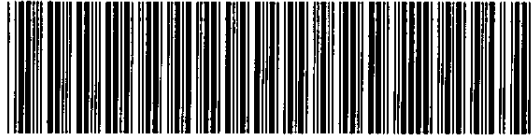
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12/03/07--01039--016 \*\*78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 DEC -3 PM 2:30

EP 12/04/07

## COVER LETTER

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

SUBJECT: AIMBS WEALTH SERVICES, 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: AIMBS WEALTH SERVICES, INC.

Name (Printed or typed)

9375 FONTAINEBLEAU BLVD SUITE L415

Address

MIAMI, FL 33172

City, State & Zip

305 479 1551

Daytime Telephone number

**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:

**AIMBS WEALTH SERVICES, INC.**

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

9375 FONTAINEBLEAU BLVD

SUITE L415

MIAMI, FL 33172

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**SERVICES**

### **ARTICLE IV SHARES**

The number of shares of stock is:

**100**

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

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

**LILLIAN H. SANCERNI - PRESIDENT**

**9375 FONTAINEBLEAU BLVD**

**SUITE #L415**

**MIAMI, FL 33172**

**AISHEL MORTILLARO - VICE PRESIDENT**

**9375 FONTAINEBLEAU BLVD**

**SUITE #L415**

**MIAMI, FL 33172**

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**ARTICLE VI REGISTERED AGENT**

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

LILLIAN H. SANCERNI  
9375 FONTAINEBLEAU BLVD  
SUITE #L415  
MIAMI, FL 33172

**ARTICLE VII INCORPORATOR**

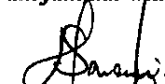
The name and address of the Incorporator is:

LILLIAN H. SANCERNI  
9375 FONTAINEBLEAU BLVD  
SUITE #L415  
MIAMI, FL 33172

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SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
07 DEC -3 PM 2:30

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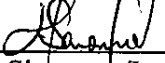
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



\_\_\_\_\_  
Signature/Registered Agent

11/14/07

\_\_\_\_\_  
Date



\_\_\_\_\_  
Signature/Incorporator

11/14/07

\_\_\_\_\_  
Date