(Requestor's Name)			
(Address)	600160192126		
(Address) (City/State/Zip/Phone #)			
PICK-UP WAIT MAIL	09/14/0901006010 **78.75		
(Business Entity Name)			
(Document Number)			
ertified Copies Certificates of Status	RE RE		
Special Instructions to Filing Officer:	DEIVED PIL MID: 55		
	2009 STALLAT		
Office Use Only	J. Sthuese SEP 22 The State J. Sthuese SEP 22 The J. Sthuese SEP 22 The J. State J. Sthuese SEP 22 The J. Structure J. Structure State Sta		

LAZARUS CORPORATE FILING	SERVICE			
3320 SW 87 TH AVENUE				
MIAMI, FL 33165 (305	5) 552-5973	• .		
		Office Use Only	· ·	
CORPORATION NAME(S) & DO	DCUMENT NUMBER(S),	(if known):		
, BLUE AN	IGEL COM	B		
(Corporation Name)	(Document #)	/	·····	
2.				
(Corporation Name)	(Document #)		*****	
3			2009 SEC	
(Corporation Name)	(Document #)		SEP	<u> </u>
4.			SSEI SSEI	
(Corporation Name)	(Document #)		FE S	
Walk in Dick up tim	e 2.00	Certifi		
Mail out Will wait	Photocopy	Certifi	icate of Status	
NEW FILINGS	AMENDMENTS			
Profit	Amendment			
Not for Profit		f R.A., Officer/I	Director	
 Limited Liability Domestication 		gistered Agent		
Other		Tindrawai		
OTHER FILINGS	REGISTRATION	N/OTTAT JETCA	TION	
		WY UNLIFTON		
Annual ReportFictitious Name	Generation Foreign Limited Partn			
	Reinstatemen Trademark	t .		
	Other		4	
		ſ		



ARTICLES OF INCORPORATION

OF

ANGELS INTERNATIONAL BAR & RESTAURANT CORP.

The undersigned subscribers to these Articles of Incorporation, each natural person competent to contract, hereby associate themselves together to form a corporation under the laws of the State of Florida.

ARTICLE I NAME

The name of the corporation is:

ANGELS INTERNATIONAL BAR & RESTAURANT CORP.

ARTICLE II ADDRESS

The initial post office address of the principal office of this corporation in the State of Florida is: 16900 N BAY RD APT 1611, SUNNY ISLES BEACH FL33160 The Board of Directors may move, from time to time, the principal office to any other address in the State of Florida.

ARTICLE III PURPOSE

The purpose of the corporation is to engage in any lawful act of activity for which corporations may be organized under the General Corporations Laws of the State of Florida, and the Laws of the United States of America. To exercise all power convenient, incident to, or necessary in the proper conduct of its business, which are granted to corporations for profit under the Laws of the State of Florida, either by the terms of this charter or by virtue of the Laws of the State of Florida.

ARTICLE IV SHARES

The maximum number of shares of stock that this corporation is authorized to have outstanding at any time is 10,000 shares of common stock having a nominal par value of \$ 1.00 per share; all shares shall be paid in lawful money of the United States of America or in property, labor or services, the just value thereof shall be fixed by the Board of Directors of the corporation in the manner provided for by the Laws of the State of Florida.

ARTICLE V DIRECTORS

This corporation shall have TWO directors, initially. The number of directors may be increased or diminished from time to time, by by-laws adopted by the stockholders, but shall never be less than TWO.

ARTICLE VI INITIAL DIRECTORS

The names and post office addresses of members of the First Board of Directors are:

•

PDTE SILVIA CALVINO 16900 N BAY RSD 1611,SUNNY ISLES BEACH,FL33160 VICE-PDTE DIEGO CALVINO 16900 N BAY RD APT-1611SUNNY ISLES BEACH FL 33160

ARTICLE VII REGISTERED AGENT

The name and street address of Registered Agent to these Articles of incorporation is:

PDTE SILVIA CALVINO 16900 N BAY RSD 1611, SUNNY ISLES BEACH, FL33160

The undersigned Registered Agent has executed these Articles of Incorporation this 11 day of SEPTEMBER, 2009.

aue Signature

PDTE SILVIA CALVINO

ARTICLE VIII INCORPORATOR

The name and street address of the incorporator to these Articles of incorporation is:

PDTE SILVIA CALVINO 16900 N BAY RSD 1611, SUNNY ISLES BEACH, FL33160

The undersigned Incorporator has executed these Articles of Incorporation this 11 day of SEPTEMBER, 2009.

Signature

PDTE SILVIA CALVINO

STATE OF FLORIDA} SS { COUNTY OF DADE }

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared:

PDTE SILVIA CALVINO

To me known to be the persons described as subscribers in and who executed the foregoing Articles of Incorporation, and acknowledged before me that they subscribed to those Articles of Incorporation.

WITNESS my hand and official seal in the County and State named above this 11 day of SEPTEMBER, 2009



Quary

R. A. Alfonso Notary Public State of Florida at large

My commission expires:

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept services of process for the above stated corporation, at place designated in this certificate. I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Signature PDTE SILVIA CALVI **Registered Agent**