

P10000085296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

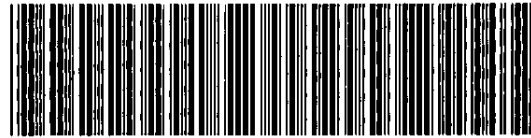
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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10/18/10--01021--025 \*\*87.50

FILED

10 OCT 18 PM 3:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PS 10/19/10

## COVER LETTER

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

SUBJECT: City of Angelz 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: Ralph Armand  
Name (Printed or typed)

1811 SW 156<sup>th</sup> Ave  
Address

Miramar, Florida, 33027  
City, State & Zip

(954) 627-4759  
Daytime Telephone number

armand09@gmail.com  
E-mail address: (to be used for future annual report notification)

**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:

City of Angelz Inc

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## **ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

1811 SW 156<sup>th</sup> ave Miramar FL, 33027

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To branch different business under  
city of Angelz

## **ARTICLE IV SHARES**

The number of shares of stock is:

1

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

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

Ralph Armand P, V, S, D.

## **ARTICLE VI REGISTERED AGENT**

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

Ralph Armand

1811 SW 156<sup>th</sup> Ave Miramar FL, 33027

## **ARTICLE VII INCORPORATOR**

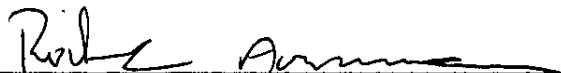
The name and address of the Incorporator is:

Ralph Armand

1811 SW 156<sup>th</sup> ave Miramar FL, 33027

\*\*\*\*\*

*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

10/12/10

Date



Signature/Incorporator

10/12/10

Date