## P10000089800

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

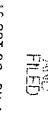
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## **COVER LETTER**

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

SUBJECT: ANCHERIL ENTERPRISES INC. Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$87.50 \$70.00 \$78.75 Filing Fee Filing Fee Filing Fee, Filing Fee Certified Copy & Certificate of Status & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: GEORGE A. ANCHERY Name (Printed or typed) TAMPA, FLORIDA. 33647
City, State & Zip 813-319-7018 Daytime Telephone number 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 The name of the	Corporation shall be:	PRISES INC.	
	PRINCIPAL OFFICE		
	Principal street address	Mailing address, if different is:	
	20014 Daytona Way		
	Tampa, FL. 33647.		
ARTICLE III			
The purpose for	which the corporation is organized is:		
Investment	purposes, real estate.		•
ARTICLE IV			
The number of si	hares of stock is:500 Shares @\$1.00 per	r share.	
	INITIAL OFFICERS AND/OR DIRECT		,
Address:	Title: George A Anchery 20014 Daytona Way	Name and The	
Addiess.	Tampa, Fl. 33647		#* ·
			<b>7</b> ≤ 0
			Fö 😑
Name and	Title:	Name and Title:	<u></u>
Address:		Address:	<u> </u>
<b>N</b> I	T'41-	Name and Title.	
Name and	Title:	Name and Title:	
			<u> </u>
	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Charles Inije		
Address:	3600 SE State Rd. Suite #2		
	Miramar, FL 33023		
	INCORPORATOR		
	ddress of the Incorporator is:		
Name:	George A Anchery		
Address:	20014 Daytona Way Tampa, FL, 33647		
Having been na	med as registered ggent to accept service of pro	ocess for the above stated corpo	oration at the place designated in
this certificate, I	am familiar with affi accept the appointment as	registered agent and agree to a	et in this capacity
	( Will )		
			10/26/2010
	Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein Department of State constitutes a third degree fo		
		aony as proviaca joi in 5.017.13	rung a souls
Van A	e Abraham Amh		10/26/2010
- Jer	Required Signature/Incorporator	·	Date
	required dignature/indorporator		<del></del>