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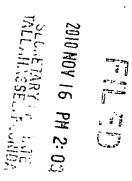
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
	·	·		
(Document Number)				
·				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
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7.844, 140 1 1 July

COVER LETTER

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

osed are an original and one (1) co	opy of the articles of incorporation a	and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of		\$87.50 Filing Fee, Certified Copy & Certificate of Status COPY REQUIRED
*		30111
FROM: <u>Taina Fernande</u>	PZ Name (Printed or typed)	,
FROM: <u>Taina Fernande</u> <u>5701 SW 199th</u>	Name (Printed or typed)	201 TAL
	Name (Printed or typed)	TALLAN.
	Name (Printed or typed) Address es. FL 33332	TALLAHASS
5701 SW 199th	Name (Printed or typed) Address	57
5701 SW 199th	Name (Printed or typed) Address es, FL 33332 City, State & Zip	TALLAHUSSES FOR

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 corp	Genu-Amos, Inc			
ARTICLE II F	PRINCIPAL OFFICE			
	Principal street address	Mailing	address, if different is:	
57	01 SW 199th Ave			
Pe	mbroke Pines, FL 33332			
	 			
ARTICLE III P	URPOSE			
The purpose for whi	ch the corporation is organized is:			
Any and all law	/ful business.			
ARTICLE IV S	SHARES			
The number of shares	s of stock is: 100			
ARTICLE V I	NITIAL OFFICERS AND/OR DIRECTOR	<u>s</u>		
Name and Title	e:Taina Fernandez, Dir/Pres/Treas	Name and Title:		
Address:	5701 SW 199th Ave	_ Address:		
	Pembroke Pines, FL 33332	_		
Name and Title	e:	Name and Title:		
Address:				
Name and Title	e:	Name and Title:		
Address:		Address:		
			3. 3.	
AD 40101 10 101 D	REGISTERED AGENT			
	da street address (P.O. Box NOT acceptable) of	f the registered agent is:	F 6	
Name:	Taina Fernandez		# 2	
Address:	5701 SW 199th Ave	- =	SEX 6	
	Pembroke Pines, FL 33332	_	PH	
ARTICLE VII I	NCORPORATOR			
	ess of the Incorporator is:		2: 0	
Name:	Taina Fernandez ARTICLE VIII		St 6	
Address:	5701 SW 199th Ave The Effective Date for the	- his		
	Pembroke Pines, FL 33332 Corporation shall be: 11/10/2			
II d L	Language of magent	a for the above stated con	monetion at the place designated in	
this certificate. I am	as registefed agent to accept service of proces. familiar with and accept the appointment as reg	s for the above stated cor ristered agent and agree to	o act in this capacity	
70 A				
-100ng	HMandor		November 10, 2010	
	Required Signature/Registered Agent		Date	
submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.				
In An	a topo a solar			
100	w To munino		November 10, 2010	