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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 JAN -3 PM 4:42

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## COVER LETTER

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

**SUBJECT: EL y ELLA SPA CENTER, INCORPORATED**  
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Angelica Garcia Avila

Name (Printed or typed)

9300 NW 25th Street, suite 107

Address

Miami , Florida, 33172

City, State & Zip

786 227 3062

Daytime Telephone number

Lasendavedica@hotmail.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:

**EL Y ELLA SPA CENTER, INC**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

9300 NW 25TH STREET, #107  
MIAMI FLORIDA 33172

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To perform services as a Beauty Salon, Health Spa services, Yoga & meditation, Wellness center, Life Consultation, Holistic and Natural Healing, Massage services, and any related business that will further the purposes of the corporation as permitted by State and County laws in the state filed.

**ARTICLE IV SHARES**

The number of shares of stock is:

**100 shares**

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

Name and Title: Angelica Garcia Avila, CEO, Director

Address: 9300 NW 25th Street Suite 107  
Miami  
Florida 33172

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Martha Beltran, Vice-President

Address: 6101 NW 70th Avenue  
Tamarac  
Florida 33321

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Angelica Garcia Avila  
Address: 12922 SW 133 Court, Suite A100  
Miami, Florida, 33186

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Angelica Garcia Avila  
Address: 12922 SW 133 Court, Suite A100  
Miami, Florida 33186

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

Angelica Garcia Avila  
Required Signature/Registered Agent

12/30/2010  
Date

I 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.

Angelica Garcia Avila  
Required Signature/Incorporator

12/30/2010  
Date

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