

PI1000060293

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

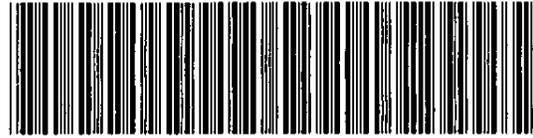
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
11 JUN 30 PM 2:28
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
13 JUN 30 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten mark

COVER LETTER

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

SUBJECT: MALAMBO FUSION COMPANY
(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: CLAUDIO PONCE
Name (Printed or typed)

1001 NE 6 ST
Address

HALLANDALE BEACH - FL - 33009
City, State & Zip

954-534-5885
Daytime Telephone number

argentinefolck@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: MALAMBO FUSION COMPANY, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 1001 NE 6 ST, HALLANDALE BEACH - FL, 33009

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ENTERTAINMENT

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CLAUDIO PONCE, Address: 1001 NE 6 ST, HALLANDALE BEACH - FL, 33009

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: CLAUDIO PONCE, Address: 1001 NE 6 ST, HALLANDALE BEACH - FL - 33009

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CLAUDIO PONCE, Address: 1001 NE 6 ST, HALLANDALE BEACH - FL - 33009

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

Required Signature/Registered Agent

Date

06/30/2011

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.

Required Signature/Incorporator

Date

06/30/2011

FILED, SECRETARY OF STATE, TALLAHASSEE, FLORIDA, JUN 30 PM 2:37