P110000775KS

(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:				

Office Use Only



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Ps 9/1/1

COVER LETTER

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

SUBJECT: Amazing Coffees, Inc.					
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:				
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status				
A SOLD OF A DECEMBER	ADDITIONAL COPY REQUIRED				
FROM: O. Frank Valladares Name (Printed or typed)					
3133 49 Street, N. Address					
	duiess				
St. Petersburg. FL 3371	0				
St. Petersburg, FL 33710 City, State & Zip					
(727) 526-2555					
Daytime Telephone number					
frank@valladareslaw.con E-mail address: (to be used	n for future annual report notification)				
NOTE: Please provide the or	iginal and one copy of the articles."				
	Energy mark				

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I The name of the corp	VAME AMAZING COFFEES, I	NC.	DIVISION OF CORPORATIONS
•			11 AUG 31 AM 11: 22
ARTICLE II I	PRINCIPAL OFFICE		
31	Principal <u>street</u> address 33 49 Street N.		Mailing address, if different is:
	Petersburg, FL 33710		
	The state of the s	•	
ARTICLE III P	IDDOCE		
	ch the corporation is organized is:		
	business purpose permitted any co	rporation und	er the Florida General
Corporations A			
ARTICLE IV S The number of share:			
		20	
	NITIAL OFFICERS AND/OR DIRECTOR e:Lourdes M. Valladares, President		en Frank Valladares Vice Presider
Address:	3133 49 Street N.	_ Address:	3133 49 Street N
114414501	St. Petersburg, FL 33710	/ 10010001	St. Petersburg, FL 33710
		_ _	
Name and Title	a.	Nome and Titl	۵۰
Address:	e:		
Addiess.		radioss.	
			
N. 100'41			
Name and Title Address:	e:	_ Name and I ttl	
Addiess.		_ Address.	
		-	
ARTICLE VI R	REGISTERED AGENT	,	
	da street address (P.O. Box NOT acceptable) o	f the registered age	ent is:
Name:	O. Frank Valladares	- 1	
Address:	3133.49 Street, N.	_	
	St. Petersburg, FL 33710	-	
ARTICLE VII I	NCORPORATOR		
	ess of the Incorporator is:		
Name:	Lourdes M. Valladares	<u> </u>	
Address:	3133 49 Street, N.	_	
	St. Petersburg, FL 33710		
	as registered agent to accept service of proces familiar with and accept the appointment as reg		
(A)	1/1		8/29/2011
	Required Signature/Registered Agent		Date
[I submit this docum	ent and affirm that the facts stated herein are	e true. I am awar	e that the false information submitted in a
	artment of State constitutes a third degree felon		
Arende	lalladares		8/29/2011
NIO JUIGO			OI E OI E O I I

Required Signature/Incorporator