

P12000046910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

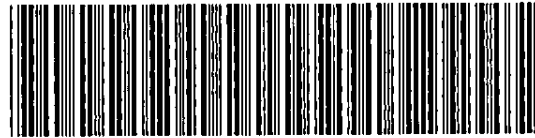
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12 MAY 18 PM 3:25  
SECRETARY OF STATE  
TALLAHASSEE, FL 32312

1 Burch MAY 21 2012

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## COVER LETTER

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

SUBJECT: Inca Living Corp

(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: Daniela Velarde

Name (Printed or typed)

9873 Lawrence Rd. Apt E305

Address

Boynton Beach FL 33436

City, State & Zip

561.386.2525

Daytime Telephone number

incaliving@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: Inca Living Corp

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
9873 Lawrence Rd. Apt E305  
Boynton Beach Fl. 33436

Mailing address, if different is:  
9873 Lawrence Rd. Apt E305  
Boynton Beach Fl. 33436

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide people with one of the best sources of omega 3 and different amino acids to promote healthy living

**ARTICLE IV SHARES**

The number of shares of stock is: 10,000,000

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

Name and Title: Daniela Velarde Director  
Address: 9873 Lawrence Rd. Apt E305  
Boynton Beach Fl. 33436

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

Name and Title: Rose Marie Velarde  
Address: 9873 Lawrence Rd. Apt E305  
Boynton Beach Fl. 33436

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: Corporation Service Company  
Address: 1201 Hays St.  
Tallahassee, FL 32301

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Daniela Velarde  
Address: 9873 Lawrence Rd. Apt E305  
Boynton Beach Fl. 33436

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

Corporation Service Company  
By: [Signature] - ASST V.P.  
Required Signature/Registered Agent

5-14-12  
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.

[Signature]  
Required Signature/Incorporator

5-15-12  
Date

FILED  
12 MAY 18 PM 3:25  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301