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12 DEC -7 AM 10:49

SECRETARY OF STATE  
HALLMARKS, CT 06103

VH

## COVER LETTER

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

SUBJECT: **BOUZA INC.**

(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: **Armando Bouza**

Name (Printed or typed)

**15062 SW 148 Ave**

Address

**Miami, FL 33196**

City, State & Zip

**786-285-4502**

Daytime Telephone number

**armandobouza@gmail.com**

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

*Effective Date 1/1/2013*

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

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**ARTICLE I NAME**

The name of the corporation shall be: **BOUZA INC.**

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
15062 SW 148 Ave  
Miami, Fl 33196

Mailing address, if different is:  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: any and all lawful business

EFFECTIVE DATE 1/1/2013

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Armando Bouza, President	Name and Title: _____
Address: 15062 SW 148 Ave	Address: _____
Miami, Fl 33196	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

Name: Armando Bouza  
Address: 15062 SW 148 Ave  
Miami, Fl 33196

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Armando Bouza  
Address: 15062 SW 148 Ave  
Miami, Fl 33196

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

1/1/2013  
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.

  
Required Signature/Incorporator

1/1/2013  
Date