

P13000015016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

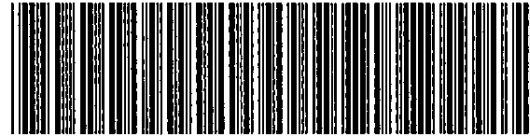
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 FEB 13 AM 11:02

Ps 2/14/13

COVER LETTER

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

SUBJECT: Ammiel Avrhm Enterprises 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

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

FROM: Dominic Edwards
Name (Printed or typed)

8042 Fawnridge circle
Address

Tampa Florida 33610
City, State & Zip

(727) 207-1421
Daytime Telephone number

ieuelinc@veizon.net
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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME Ammiel Avrhm Enterprises Inc.,
The name of the corporation shall be:

13 FEB 13 AM 11:02

ARTICLE II PRINCIPAL OFFICE
Principal street address
8042 Fawnridge circle
Tampa Florida 33610

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
To perform any and all legal business world-wide

ARTICLE IV SHARES
The number of shares of stock is: one thousand (1000)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: dominic Edwards / President Name and Title: _____
Address: 8042 Fawnridg circle Address: _____
Tampa Florida 33610 _____

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: Dominic Edwards
Address: 8042 Fawnridge Circle
Tampa Florida 33610

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dominic Edwards
Address: 8042 Fawnridge Circle
Tampa Florida 33610

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

Dominic Edwards

Required Signature/Registered Agent

Feb 8, 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.

Dominic Edwards

Required Signature/Incorporator

Feb 8, 2013

Date