

P1300078216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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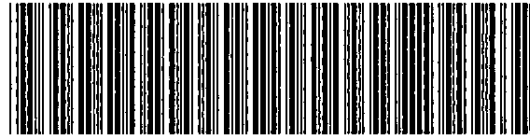
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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13 SEP 18 AM 8:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ps 9/23/13

COVER LETTER

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

SUBJECT: ALMA Management, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Florencia A. Niewialkouski
Name (Printed or typed)
709 11th Street Apt 12
Address
Miami Beach, FL 33139
City, State & Zip
305-303-6936
Daytime Telephone number
florniewial@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 ALMA Management, Inc.

The name of the corporation shall be: _____

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ARTICLE II PRINCIPAL OFFICE

Principal street address

709 11th Street Apt 12

Miami Beach, FL 33139

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Mailing address, if different is: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____ to engage in any lawful act or activity regarding
management in the field of entertainment.

ARTICLE IV SHARES 1,000

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____ Florencia A. Niewialkouski

Address _____ Director

709 11th Street Apt 12

Miami Beach, FL 33139

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Florencia A. Niewialkouski

Address: 709 11th Street Apt 12

Miami Beach, FL 33139

ARTICLE VII INCORPORATOR

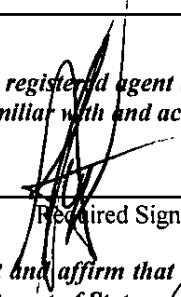
The **name and address** of the Incorporator is:

Name: Florencia A. Niewialkouski

Address: 709 11th Street Apt 12

Miami Beach, FL 33139

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

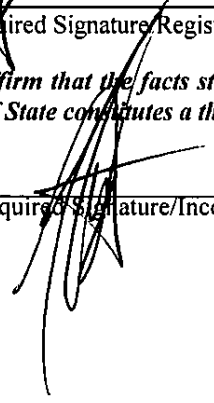


Required Signature/Registered Agent

09/13/2013

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

09/13/2013

Date