

P/30000 84647

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

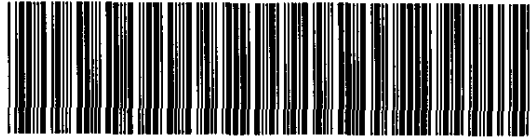
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900252751909

10/15/13--01050--007 \*\*78.75

FILED  
13 OCT 15 PM 4:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MD 10/16

## COVER LETTER

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

SUBJECT: Armando Perez Studio, 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 Perez  
Name (Printed or typed)

2029 Harrison Street #5  
Address

Hollywood, FL 33020  
City, State & Zip

954-326-3202  
Daytime Telephone number

armandodesigns@yahoo.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: Armando Perez studio, Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2029 Harrison St #5  
Hollywood, FL 33020

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Paintings and Jewelry  
designing for customers

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Armando Perez, Pres. Name and Title: \_\_\_\_\_

Address 2029 Harrison St Address: \_\_\_\_\_  
#5  
Hollywood, FL 33020

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

Address \_\_\_\_\_ Address: \_\_\_\_\_

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

Address \_\_\_\_\_ Address: \_\_\_\_\_

FILED  
13 OCT 15 PM 4:18  
SECRETARY OF STATE  
ALLAHBACH FLORIDA

(cont.)

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 Perez  
Address: 2029 Harrison St #5  
Hollywood, FL 33020

FILED  
13 OCT 15 PM 4:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

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

Name: Armando Perez  
Address: 2029 Harrison St #5  
Hollywood, FL 33020

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

Armando Perez 10/10/13  
Required Signature/Registered Agent 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.

Armando Perez 10/10/13  
Required Signature/Incorporator Date