## P/4000018509

(Re	equestor's Name)			
(Address)				
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Ви	isiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
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Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORIDA

DEC 9 2014 S. GILBERT

## **COVER LETTER**

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

SUBJECT: AANM INVESTMENT CORP.  (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed are an orig  \$70.00 Filing Fee	inal and one (1) copy of the ar  \$78.75  Filing Fee  & Certificate of Status	<del>-</del> .	\$87.50 Filing Fee, Certified Copy & Certificate of Status	

FROM:	NATALIE NICOLE MOYANO			
Name (Printed or typed)				
	11542 SW 187 TERRACE			
	Address			
	MIAMI, FL 33157			
	City, State & Zip			
	305-469-2000			
	Daytime Telephone number			
	NATALIE 611@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)

	In compliance with Chapter 607 an	d/or Chapter 621, I	F.S. (Profit)
ARTICLE I NAM	Etion shall be: AANM INVEST	MENT C	ORP. 1/200
ARTICLE II PRI	NCIPAL OFFICE Principal street address 87 TERRACE	, ,	ORP. 14 DEC -8 PH 12: 13 Mailing address indifferentias: OF STATE ALL AHASSEE, FLORIDA
MIAMI, FL 3	3157		
ARTICLE III PUR. The purpose for which the	POSE he corporation is organized is:	EST IN RES	SIDENTIAL REAL ESTATE
ARTICLE IV SHA The number of shares of	RES stock is:	<del></del>	
	TIAL OFFICERS AND/OR DIRECTO		AMMIS ALVAREZ - VICE PRESIDENT
Name and Title	11542 SW 187 TERRACE	Name and Title Address:	11542 SW 187 TERRACE
Address	MIAMI, FL 33157		MIAMI, FL 33157
Name and Title:	_	Name and Title	
Address			
		<del></del>	
Name and Title:			
Address			
		<del></del>	

Name a	and Title:	Name and Title:
Addre		Address:
ARTICLE VI	REGISTERED AGENT	
The <u>name and</u>	Florida street address (P.O. Box NOT acceptable) o	f the registered agent is:
Name:	NATALIE NICOLE MOYANO	_
Address:	11542 SW 187 TERRACE	
	MIAMI, FL 33157	-
The name and :  Name:  Address:	INCORPORATOR  address of the Incorporator is:  NATALIE NICOLE MOYANO  11542 SW 187 TERRACE	-
ridatess.	MIAMI, FL 33157	<del>-</del> -
	amed as registered agent to accept service of process. I am familiar with and accept the appointment as reg	for the above stated corporation at the place designated in existered agent and agree to act in this capacity
	Required Signature/Registered Agent	Date
	ocument and affirm that the facts stated herein are Department of State constitutes a third degree felor	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.
_4	Required Signature/Incorporator	12   3   14 Date