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## **COVER LETTER**

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

SUBJECT: C & CH BY THE KINGDOM, 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

۱M·	Carlos O. Pereira		
, 14¥.	Name (Printed or typed)		
	5441 w 24 ave #61		
•	Address		
	Hialeah, FI, 33016.  City, State & Zip		
	305 619 7249		
	Daytime Telephone number		
	meliabilili@hotmail.com		
	F-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)

ICLE II PR	INCIPAL OFFICE		
ICLE II FRO	Principal street address	Mailing address, if differen	ıt is: کی
41 W 24	AVE #61		
ΔΙ ΕΔΗ Γ	FL, 33016.	. <del></del>	1
<u> </u>	L, 330 10.		755 700
•			13 er
ICLE III PUR	POSE ANY AN	DALLIAMELII BUSINESS	70
purpose for which	PPOSE the corporation is organized is:		76 Z
			, F. v
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	<del>V / </del>		
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TICLE IV SH.	ARES f stock is: 100		
number of shares of	f stock is: 100  TIAL OFFICERS AND/OR DIRECTOR	<u>s</u>	
number of shares of	f stock is:	S Name and Title:	
TCLE V INI  Name and Titl	f stock is: 100  TIAL OFFICERS AND/OR DIRECTOR	Name and Title:	
number of shares of	TIAL OFFICERS AND/OR DIRECTOR e: CARLOS O. PEREIRA 5441 W 24 AVE #61	_	
TCLE V INI  Name and Titl	Tial officers and/or director e:CARLOS O. PEREIRA	Name and Title:	
TCLE V INI  Name and Titl	TIAL OFFICERS AND/OR DIRECTOR e: CARLOS O. PEREIRA 5441 W 24 AVE #61	Name and Title:	
TCLE V INI  Name and Titl	TIAL OFFICERS AND/OR DIRECTOR e: CARLOS O. PEREIRA 5441 W 24 AVE #61	Name and Title:	
TCLE V INT  Name and Titl  Address	TIAL OFFICERS AND/OR DIRECTOR e: CARLOS O. PEREIRA 5441 W 24 AVE #61	Name and Title:	
TCLE V INT  Name and Title  Address	TIAL OFFICERS AND/OR DIRECTOR  CARLOS O. PEREIRA  5441 W 24 AVE #61  HIALEAH, FL, 33016	Name and Title:  Address:  Name and Title:	
TCLE V INT  Name and Titl  Address	TIAL OFFICERS AND/OR DIRECTOR  CARLOS O. PEREIRA  5441 W 24 AVE #61  HIALEAH, FL, 33016	Name and Title:  Address:  Name and Title:	
TCLE V INT  Name and Title  Address	TIAL OFFICERS AND/OR DIRECTOR  CARLOS O. PEREIRA  5441 W 24 AVE #61  HIALEAH, FL, 33016	Name and Title:  Address:  Name and Title:	
TCLE V INT  Name and Title  Address	TIAL OFFICERS AND/OR DIRECTOR  CARLOS O. PEREIRA  5441 W 24 AVE #61  HIALEAH, FL, 33016	Name and Title:  Address:  Name and Title:	
TCLE V INT  Name and Title  Address	TIAL OFFICERS AND/OR DIRECTOR  CARLOS O. PEREIRA  5441 W 24 AVE #61  HIALEAH, FL, 33016	Name and Title:  Address:  Name and Title:	
Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR  CARLOS O. PEREIRA  5441 W 24 AVE #61  HIALEAH, FL, 33016	Name and Title:  Address:  Name and Title:  Address:	
Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR  CARLOS O. PEREIRA  5441 W 24 AVE #61  HIALEAH, FL, 33016	Name and Title:  Address:  Name and Title:  Address:	
Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR  CARLOS O. PEREIRA  5441 W 24 AVE #61  HIALEAH, FL, 33016	Name and Title:  Address:  Name and Title:  Address:	

Name and	Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT		Since we
The name and Fig	orida street address (P.O. Box NOT acceptable) of	the registered agent is:	<b>造</b> 。 <b>5</b>
Name:	CARLOS O. PEREIRA		
Address:	5441 W 24 AVE #61	_	3 on [
	HIALEAH, FL, 33016		Fr PH I
ARTICLE VII	INCORPORATOR	•	TORIDA STATE 4: 18
The name and ad	dress of the Incorporator is:		
Name:	CARLOS PEREIRA		
Address:	5441 W 24 AVE #61	-	
	HIALEAH, FL, 33016. US		
	ed as registered agent to accept service of process m familiar with and accept the appointment as reg		
	Required Signature/Registered Agent		Date
	ment and affirm that the facts stated herein are epartment of State constitutes a third degree felon	y as provided for in s.817.155, F.S.	rmation submitted in a
	Required Signature/Incorporator		Date