

**AL5000030839**

Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
AMALIA'S ANGELS INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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Attention: Jessica Fason



April 3, 2015

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LAZARUS CORPORATE FILING SERVICE, INC.

SUBJECT: AMALIA'S ANGELS INC  
REF: W15000023331

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason  
Regulatory Specialist II

FAX Aud. #: H15000082530  
Letter Number: 815200006676

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STATE OF FLORIDA  
TALLAHASSEE

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**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

H15000082500

**ARTICLE I NAME:** The name of the corporation is:

Amalia's Angels Inc

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

P: 3461 SW 137 Ave

Miami, FL 33175

M: PO Box 654913 - Miami, FL 33265

**ARTICLE III SHARES:** The number of shares of stock is: 100

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Matilde Torrente (P)

Michelle Torrente (VP)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

George L. Torrente

3461 SW 137 Ave

Miami FL 33175

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

George L. Torrente

3461 SW 137 Ave

Miami FL 33175

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**Required Signatures:**

**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**

\_\_\_\_\_  
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.**

\_\_\_\_\_  
Incorporator\_\_\_\_\_  
Date

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TALLAHASSEE FLORIDA

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