

02/15/2015 05:39

#1621 P.001/003

P/5000032623

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

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

**FLORIDA PROFIT/NON PROFIT CORPORATION  
ARCHANGEL SAINT MICHAEL CORP.**

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

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DIVISION OF CORPORATIONS

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

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

Archangel Saint Michael Corp.

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

17560 NW 27 Ave, #122  
Miami, Florida zip 33056

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

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

Carlos Lora (PRESIDENT)

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

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

CARLOS LORA  
17560 NW 27 AVE, #122  
MIAMI FL 33056

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

CARLOS LORA  
17560 NW 27 AVE #122  
MIAMI FL 33056

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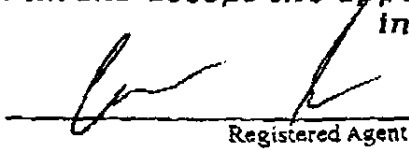
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**Required Signatures:**

**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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