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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL MAIL
(Bı	isiness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



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SECRETARY OF STATE MILAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT:	Americas Sou (PROPOSED CORPORA	venirs Inc	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	icles of incorporation and	i a check for:
\$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM:	Gerald A	edriguez (Printed or typed)	
	14844 Sw	71 terrace	
		FL 33193 State & Zip	
	786)36	7-6103	
_		elephone number	1 (0 000
	Groarige R-mail address: (to be used	1286 gman	

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 22, 2015

GERALD RODRIGUEZ 14844 SW 71 TERRACE MIAMI, FL 33193

SUBJECT: AMERICAS SOUVENIRS INC

Ref. Number: W15000081809

We have received your document for AMERICAS SOUVENIRS INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 015A00026752

Attn: Val

GENERAL AFFIDAVIT

As a resident in county Miami-Dade within state of Florida, Gerald Rodriguez personally approached me, the undersigned Notary, and made his swom testimony in a general affidavit, that the following statement is completely factual and true to the best of his belief and knowledge.

Statement:

To:

Department of State Division of Corporations Corporate Filings P.O. Box 6327 Taliahassee, FL 32314

I, Gerald Rodriguez, was owner of America's Souvenirs INC, with document number P130 00037830 and FEI/EIN 26-7845822. The corporation was dissolved in Dec. 31 2014 with no Intent of reinstating. Please make note of this and release the name for use to another entity.

Affliant Signature:

Date signed:

12/03/15

Sworen and subscribed to before me on this day of J2 of . 2 of 2015

MIGUEL A. PARRALES

Notary Public - State of Florida

My Comm. Expires May 22, 2017

Commission # FF 020671

EFFECTIVE DATE OI OI / 10

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

APPRUVEL AND FILED	
FILED	

The name of the corporation shall be: Americas	Souvenirs	Inc	76 JAN ~4	PM 4: 45
ARTICLE II PRINCIPAL OFFICE Principal street address	Mail	ing address, i	SECRETARY rdifferentiassee	OF STATE FLORIDA
7795 West Flagler St	14844	sw	71 ten	race
Miami, FL 33144	Mign	M. FO	33193	3
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	port/exports	<u>ou ven</u>	YS.	
uholesale, re	' 1 '	appa		
		~~~·		
				·
*	,			
ARTICLE IV SHARES The number of shares of stock is:				
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	RS			
Name and Title: Gerald Rodriguez	<del></del>			150.515
Address 14844 SW 71 tr	Yacc Address:			
M1am1, FC 3319	<u> </u>			
			<u> </u>	
Name and Title: Jennifer Linfozzi	(VP) Name and Title:			
Address 14844 SW 71 to		· · · · · · · · · · · · · · · · · · ·		· <del></del>
Miami, FC 3319	73	<del></del>		
<u></u>	<del></del>			
Name and Title:	Name and Title:			
Address	Address:			
			·	, <u> </u>



Name and Title:	Name and Title:	
Address	Address:	SECRETARY OF THE
		TATLAHASSEE FI CRIDA
	,	7
		*
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box No.	OT acceptable) of the registered agent is:	
Cascald Pode	cique7	
Name: Gerald hour	19002	
Address: 19099 SW 11	terrace	
Miami FC 3	3193	
		·
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator is:	1	·
Name: Gerald ROC	driquez	
Address: 14844 SW T	11 terrace	
Miami FC	33193	
ARTICLE VIII EFFECTIVE DATE:	1/1/16 (OPTION)	
Effective date, if other than the date of filing:	. (01 120: 11	
days after the filing.)	being war country be more than 11.0 but	
Note: If the date inserted in this block does not me	eet the applicable statutory filing requireme	ents, this date will not be listed as
the document's effective date on the Department of	State's records.	
Having been named as registered agent to accept s	service of process for the above stated cor	noration at the place designated in
this certificate, I am familiar with and accept the a	ppointment as registered agent and agree i	to act in this capacity
10		12/10/15
Required Signature/Regi	stered Agent	Date
I submit this document and affirm that the facts s	stated herein are true. I am aware that th	ne false information submitted in a
document to the Department of State constitutes a t	third degree felony as provided for in s.817	
Required Signature/Incorporator		12/10/15 Date
Required Signature/Incorporator	•	Date