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☐ PICK-UP

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(Business Entity Name)

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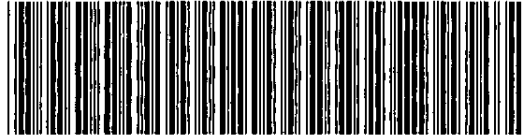
Certified Copies _____ Certificates of Status _____

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OCT 27 2016

T. SCOTT



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10/24/16--01018--003 **87.50

OCT 24 PM 12:32

COVER LETTER

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

SUBJECT: AndGo Enterprises

(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

FROM: Clara I. Gomez
Name (Printed or typed)
12434 Bramfield Drive
Address
Riverview, FL 33579
City, State & Zip
813-802-1636
Daytime Telephone number
Clara_GomezGuarin@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)

ARTICLE I NAME

AndGo Enterprises, Inc.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

12434 Bramfield Drive

Riverview, FL 33579

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purposes of the corporation is to engage in any lawful act or
The purpose for which the corporation is organized is: _____
activity for which a corporation may be organized in the State of Florida. The Corporation will have a perpetual existence
unless dissolved by the officers, directors, shareholder or operation of law.

ARTICLE IV SHARES

1

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Clara I. Gomez	Name and Title:	President
Address	12434 Bramfield Drive	Address:	_____
	Riverview, FL 33579		_____

Name and Title:	Maria Alejandra Andrade Duque	Name and Title:	Vice President
Address	12434 Bramfield Drive	Address:	_____
	Riverview, FL 33579		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____

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Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Clara I. Gomez _____

Address: 12434 Bramfield Drive _____

Riverview, FL 33579 _____

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Clara I. Gomez _____

Address: 12434 Bramfield Drive _____

Riverview, FL 33579 _____

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, 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 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

Clara Gomez

Required Signature/Registered Agent

10/11/16

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.

Clara Gomez

Required Signature/Incorporator

10/11/16

Date