

P200000019156

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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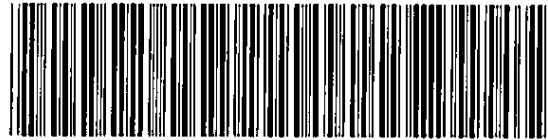
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/13/2011 01:02:00 \*\*70.00

FILED  
20 FEB 13 AM 9:00  
STATE OF FLORIDA

## COVER LETTER

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

SUBJECT: Itelia Group Corp  
(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: Stephanie Martinez  
Name (Printed or typed)

8180 NW 36 St, STE 406  
Address

Doral FL 33166  
City, State & Zip

305 - 406 - 3800  
Daytime Telephone number

atplus@live.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

The name of the corporation shall be: Itella Group Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10190 E. Bay Harbor dr, 3E  
Bay harbor Islands, FL 33154

10190 E. Bay Harbor dr, 3E  
Bay harbor Islands, FL 33154

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gustavo Lorenzo (P) Name and Title: \_\_\_\_\_

Address 10231 E. Bay harbor dr. Address: \_\_\_\_\_

APT 5B \_\_\_\_\_

Bay harbor Islands, FL 33154 \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

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

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

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

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: Gustavo Lorenzo  
Address: 10231 E. Bay Harbor dr., APT 5B  
Bay harbor Islands, FL 33154

**ARTICLE VII INCORPORATOR**

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

Name: Gustavo Lorenzo  
Address: 10231 E. Bay Harbor dr. APT 5B  
Bay harbor Islands, FL 33154

**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 days prior or 90 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*

Gustavo Lorenzo 2/4/20  
Required Signature/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.*

Gustavo Lorenzo 2/4/20  
Required Signature/Incorporator Date

## **AFFIDAVIT**

BEFORE ME, the undersigned authority, on this day personally appeared **GUSTAVO LORENZO**, who after being firstly duly sworn, under oath, deposes and says:

1. The undersigned is also the sole Director and the President of **ITELIA GROUP CORP**, a Florida corporation to be filed with the Florida Department of State on or about **February 04, 2020**.
2. The undersigned hereby consents to and authorizes the use by **ITELIA GROUP CORP**, of the name **ITELIA GROUP CORP**.
3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.

  
GUSTAVO LORENZO

STATE OF FLORIDA            )  
  ) SS:  
COUNTY OF MIAMI-DADE )

PERSONALLY appeared before me, Gustavo Lorenzo, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 4<sup>th</sup> day of February 2020.

  
Notary Public Signature

