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Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516)935-3940
Fax Number : (516)935-3088

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: HARRY@SAMUELSACCOUNTING.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION
AMELIA RETAIL PARTNERS INC**

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

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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: AMELIA RETAIL PARTNERS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2930 SW 30TH AVENUE STE K
HALLANDALE BEACH, FL 33009

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LEGAL OR LAWFUL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is: 1,500 AT NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JEAN PIERRE KLIFA - PRESIDENT

Name and Title: _____

Address: 2930 SW 30TH AVENUE STE K

Address: _____

HALLANDALE BEACH, FL 33009

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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: Harry M Samuels

Address: 2901 Stirling Road, # 307

Fort Lauderdale, FL 33312

ARTICLE VII INCORPORATOR

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

Name: JEAN PIERRE KLIFA

Address: 2930 SW 30TH AVENUE STE K

HALLANDALE BEACH, FL 33009


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.)

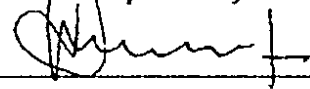
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Required Signature/Registered Agent HARRY M SAMUELS

NOVEMBER 5, 2021
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.


Required Signature/Incorporator JEAN PIERRE KLIFA

NOVEMBER 5, 2021
Date

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