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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
10/3

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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COVER LETTER

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

SUBJECT: MUCHO BUENO, INC
(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
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: RODRIGO VIEL
Name (Printed or typed)

8852 W MCNAB RD APT 102
Address

TAMARAC, FL 33321
City, State & Zip

702-498-4280
Daytime Telephone number

INFO@MUCHOBUENOSOLUTIONS.COM
E-mail address: (to be used for future annual report notification)

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) 11 SEP 30 PM 1:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: **MUCHO BUENO, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
**8852 W MCNAB RD APT 102
TAMARAC, FL 33321**

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**FOR CONDUCTING ANY AND ALL LAWFUL BUSINESS WITHIN
THE STATE OF FLORIDA.**

ARTICLE IV SHARES

The number of shares of stock is: **100 SHARES @ \$1 PAR VALUE COMMON STOCK**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **RODRIGO VIEL / PRESIDENT** Name and Title: _____
Address: **8852 W MCNAB RD APT 102** Address: _____
TAMARAC, FL 33321

Name and Title: **ENRIQUE TERMINEL / VICE** Name and Title: _____
Address: **PRESIDENT** 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: **ENRIQUE TERMINEL**
Address: **8852 W MCNAB RD APT 102
TAMARAC, FL 33321**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **RODRIGO VIEL**
Address: **8852 W MCNAB RD APT 102
TAMARAC, FL 33321**

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TALLAHASSEE, FLORIDA

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

09/22/11
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.

Rodrigo Viel

Required Signature/Incorporator

09/22/11
Date