P13000055846

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000146897 3)))

H13000146897ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : THE SOLANO GROUP, P.A.
Account Number : I20120000074
Phone : (305)441-2606
Fax Number : (305)441-8126

FILED
13 JUN 28 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: Schnzgroup5x@ATT.Net

RECEIVED
13 JUN 28 PM 3:21
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
San Lazaro Cafeteria, Inc

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	$78.75

MRD 7/1/13

Electronic Filing Menu Corporate Filing Menu Help

FILED
13 JUN 28 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: San Lazaro Cafeteria, Inc

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:

Principal street address	Mailing address, if different is:
2400 West 2nd Ave Hialeah, FL 33010	

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 Shares @ $1.00 each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Yaniuska B. Rodriguez P,S,T,D
Address: 2400 West 2nd Ave, Hialeah, FL 33010

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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

Name: Yaniuska B. Rodriguez
Address: 2400 West 2nd Ave
Hialeah, FL 33010

FILED

13 JUN 28 PM 12:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Yaniuska B. Rodriguez

Address: 2400 West 2nd Ave
Hialeah, FL 33010

****

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 — Date: 6/28/13

I submit this document and affirm that the facts stated herein are true. I am aware that any 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 — Date: 6/28/13