

FLORIDA DEPARTMENT OF REVENUE  
Division of Corporations  
Electronic Filing Cover Sheet

**P14000074166**

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.

(((H14000208765 3)))



H140002087653AB00

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 : LAZARUS CORPORATE FILING SERVICE INC  
Account Number : I20000000019  
Phone : (305) 552-5973  
Fax Number : (305) 675-5944

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 SEP -5 AM 9:27

FILED

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

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

**FLORIDA PROFIT/NON PROFIT CORPORATION  
SPECIAL K DRAGON FRUIT CORP.**

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

*09/08/14*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 SEP -5 PM 3:26

RECEIVED

H14000208765

# Articles of Incorporation

IN COMPLIANCE WITH CHAPTER 607 AND/OR CHAPTER 621, F.S.

**Article I - Name:** The name of the corporation shall be

SPECIAL K DRAGON FRUIT Corp.

**Article II - Principal and Mailing Address**

20950 S.W. 210th STREET  
MIAMI - FLORIDA 33187

**Article III - Shares**

The number of shares of stock is: 100

**Article IV - Initial Officers and/or Directors**

JUAN JOSE DELGADO - PRES.

**Article V - Registered Agent**

The name and Florida street address of the registered agent is:

JUAN JOSE DELGADO  
7811 CORAL WAY # 133  
MIAMI - FLORIDA 33147

**Article VI - Incorporator**

The name and address of the incorporator is:

JUAN JOSE DELGADO  
20950 S.W. 210th STREET  
MIAMI - FL. 33187

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 SEP -5 AM 11:27

FILED

H14000208765

**Required Signatures:**

**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**

**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.**

*[Handwritten Signature]* 9/4/2014  
REGISTERED AGENT / Incorporator Date

FILED  
14 SEP -5 AM 11: 27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA