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(R	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(8	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Miss Maria Inez, Inc.						
						
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	. <u>.</u> .			Art of Inc. File		
				LTD Partnership File Foreign Corp. File	•	
				L.C. File		
		•		Fictitious Name File		
				Trade/Service Mark		
				Merger File	2513	
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		!	$\overline{\times}$	Certificate of Good Standing		
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Requested by: SETH	12/11/10			UCC 1 or 3 File		
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MISS MARIA INEZ, TWC.
Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
EOWARD CUEVAS DR.
Name of Person
- CHEVAS TRAWLERS INC
Firm/Company
P.O. Box 129 / 125 South Shore Drive Address
Address
PORT ISABEL, TEXAS 18518
City/State and Zin code
e)_cuevas@live.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, places well.
CA
Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1 M15.	S MARIA INEZ, -	Two.					
(Enter name (of corporation; must include "IN "Corp," "Inc," "Co," or "Corp.	NCORPORATED " "C	OMPANY," "C	ORPORA	TION,"		
							
	railable in Florida, enter alterna						
2. TEXA	5 OR USA. intry under the law of which it i	3	<u> </u>				
i 14	intry under the law of which it i	is incorporated)	(FE	El number.	if applicable)	-	
4(D	24. 1991 (ate of incorporation)	5	(Date of du	ıration, if o	ther than per	petual)	
6						,	
	(SEE SECTIONS (ansacted business in Flo 607.1501 & 607.1502, I	FS to determin	11 بيولمسجم ح	- In 1112-1-15		
7. 125	BOX 129 , PO	no DRIVE	PORT I	SABEL	TEXAS	18578	
.2 .	0 000	(Principal of	Tice address)				
V.O.	Box 129 , Pol	et ISABEL -	TEXAS	7857	<i>'8</i>	~>	
	·	(Current mailing ad	dress, if different	t)		. J 610	
8. Name and st	reet address of Florida regis	tered agent: (P.O. Bo	ox <u>NOT</u> accept	table)			· ·
Name:	Your Capital Connection, In 417 E VIRGINIA ST	ic.				2	, . <u>.</u>
000	SHITE I						
Office Address:	TALLAHASSEE, FL 32301					H: 0	
						သိ	
9. Registered a	agent's acceptance:						
Having been na	imed as registered agent an	id to accept service of	f process for th	e above s	tated corpor	ation at the n	lace
'K (1	ris application, I hereby accomply with the provisions	'VIII	Also market and and a				
duties, and I an	n familiar with and accept t	the obligations of my	position as reg	r ana con gistered ag	iptete perfoi gent.	rmance of my	1
	/S/ Seth Neeley as authorized	d representative of Your	Capital Connect	tion, Inc.			
		(Registered agent	's signature)				
		_	- ,				

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	· · · · · · · · · · · · · · · · · · ·
Address:	
Director:	
Address:	
B. OFFICERS	
President: Jose G. Cuevas	
Address: 128 E. CAROLYN, SOUTH PADRE TSLAND, 7 P.O. BOX 129, BET TSABEL, TEXAS 18	X 78597
P.O. BOX 129 BET TEABEL TEXAS 18	3578
Vice President:	<u> </u>
Address:	
	N :
Secretary;	.:
Address:	: 00
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing addition	onal officers and/or directors
12. Signature of Director or Officer	onar others and/or unccloss.
are true and that he or she is aware that false information submitted in a document a third degree felony as provided for in \$ 817.155. F.S.	to the Department of State constitutes
(Typed or printed name and capacity of person signing app	Cueus President
(Typed of printed name and capacity of person signing app	olication)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

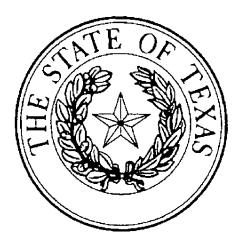
Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for MISS MARIA INEZ, INC. (file number 119017600), a Domestic For-Profit Corporation, was filed in this office on April 24, 1991.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 11, 2019.

F. H: 03



Ruth R. Hughs Secretary of State

Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 931503190020

Phone: (512) 463-5555 Prepared by: SOS-WEB