## N12000003460

(Requestor's Name)
(Address)
(r. 1001000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W12-14485



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03/09/12--01008--018 \*\*78.75



Office Use Only

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## **COVER LETTER**

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

SUBJECT: LATI	N FESTIVALS, I	NC.	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u> I	<u>UDE SUFFIX</u> )
Enclosed is an original  \$70.00 Filing Fee	and one (1) copy of the All \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	OPY REQUIRED
FROM:	LATIN FESTIVAL	_S, INC.	

4404 GEORGIA AVENUE

Address

WEST PALM BEACH, FL 33405

City, State & Zip

561-835-4913

4404 GEORGIANA TEMPERONE number

ellatino@msn.com

Name (Printed or typed)

E-mail address: (to be used for future annual report notification)

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



March 13, 2012

MIGUEL LAVIN 4404 GEORGIA AVENUE WEST PALM BEACH, FL 33405

SUBJECT: LATIN FESTIVALS, INC. Ref. Number: W12000014485

We have received your document for LATIN FESTIVALS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

This corporation name is not available because of Pending Reinstatement.

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 012A00009219

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of the o	Festival Latino de Palm corporation shall be:	Beach, Fl. Inc. F肛上部
ARTICLE II	PRINCIPAL OFFICE	12 APR -2 PM 1: 32
IRTICLE II	Principal street address	Mailing address if different is:
	4404 Georgia Avenue	Mailing address, if different is:
	West Palm Beach, Fl 33405	
ARTICLE III	PURPOSE	
	which the corporation is organized is:	
Promote Lat	· -	
LRTICLE IV	MANNER OF ELECTION The manner in w	hich the directors are elected and appointed:
√ote.		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	<u>ks</u>
	litle: Miguel Lavin, P	
Address:	4404 Georgia Avenue	Address:
	West Palm Beach, FI 33405	
Name and T	itle:Carolina Lavin, VP	Name and Title:
Address:	4404 Georgia Avenue West Palm Beach, Fl 33405	Address:
	West Palm Beach, FI 33405	
Name and T	itte: Violeta Letourneaut, S	Name and Title:
Address:	4404 Georgia Avenue	Address:
<u>W</u>	West Palm Beach, Fl 33405	
RTICLE VI	REGISTERED AGENT	
	orida street address (P.O. Box NOT acceptable) of t	he registered agent is:
Name:	Miguel Lavin	
Address:	4404 Georgia Avenue	•
	West Palm Beach, Fl 33405	
RTICLE VII	INCORPORATOR	
	dress of the Incorporator is:	
Name:	Miguel Lavin	
Address:	4404 Georgia Avenue	
	West Palm Beach, Fl 33405	
avin <mark>g been n</mark> an	ned as registered agent to accept service of process	for the above stated corporation at the place designated in the
rtificate, Lam fa	miliar with and accept the appointment as registered	l agent and agree to act in this capacity
D	m	3/29/2012
	Required Signature of Registered Agent	Date
submit this docu	ment and affirm that the facts stated herein are true of State constitutes a third degree felony as provided	e. I am aware that any false information submitted in a docume
ine Department	og State constitutes a mira degree Jetony as provided	gur in 8.61 /.133, P.S.
		3/29/2012
·	Regulated Signature of Incorporator	Data