P0000042739

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

\$00003201739--5 -04/10/00--01120--007 *****87.50 ******87.50

SUBJECT:	EL SANTO COLS	TO' BUEN rate name - must include suf	VIA)E.	
Enclosed is an origina	al and one (1) copy of the articl	es 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	
	la Maria	ADDITIONAL CO		
FROM: MR. MIGUEL (SONTAGE 2. Name (Printed or typed)				
GU80 SW 48T Address				
	MIAMI FL City,	33144	***************************************	
City, State & Zip 305 - 264 - 3978			00 APR 28 SECRETARY TALLAHASS	
£ 3551,25	·	•		
505,8551,85 _10131	(SO) OTE: Please provide the ori	iginal and one copy of	the articles DATE	
	2+1-4			



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 18, 2000

MIGUEL GONZALEZ 6480 S W 4TH STREET MIAMI, FL 33144

SUBJECT: EL SANTO CRISGO BUEN VIAJE

Ref. Number: W00000010131

We have received your document for EL SANTO CRISGO BUEN VIAJE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the 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) 487-6972.

Doris Brown Document Specialist

Letter Number: 000A00021070

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:				
EL SANTO CRISTO B	BUEN VIAJE. INC.			
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: GURD SW 4 ST MIRMI FL 33144	TALE 00			
ARTICLE III PURPOSE The purpose for which the corporation is organized is: $REUSIOUS$	DO APR 28 AM 8: 49 SECRETARY OF STATE TALLANDSSEE, FLORIT			
ARTICLE IV SHARES The number of shares of stock is: (600 Shaars)	- 8: 49			
ARTICLE V INITIAL OFFICERS DIRECTORS The name(s) and address(es): - MIGUEL GONTALEZ ALONSO = 6480 SW 457 MIAMI PL 33144. - AILEEN MORA 6480 SW 45T MIAMI PL 33144.				
ARTICLE VI REGISTERED AGENT	Owo b			
MIGUEL GONZALEZ 6480 SW 4ST MIAMI PL 33144				
ARTICLE VII INCORPORATOR The name and address of the Incorporator are: MIQUEL GONZALEZ ALONGO - CY ALLERN MORÀ 6480 SW 4 ST				
**************************************	t and agree to act in this capacity. I further agree to comply with			
Signature/Registered Agent 22 Signature/Incorporator	03 18 00 Date			