Requester's Name JENNIE 'ROSA-ROSA Additional Party Service of the Company Service of the

FAMARAC 3332

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

(Corporation Name)	(Document #) 300003313523 -07/05/0001083-	} ——-4
2.	*****7月。80 *****	-017 *70.00
(Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	·
4. (Corporation Name)	(Document #)	
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Certified Copy Photocopy Certificate of Status	
NEW FILINGS Profit Not for Profit	AMENDMENTS Amendment Resignation of R.A., Officer/Director	
☐ Limited Liability ☐ Domestication ☐ Other	 Change of Registered Agent Dissolution/Withdrawal Merger 	
OTHER FILINGS	REGISTRATION/QUALIFICATION	
☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other S. Thompson JUL 0 7 2000	
	Examiner's Initials	

ARTICLES OF INCORPATION OF



A & D ESCOBAR, INC.

The undersigned incorporator(s), for the purposes of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

A & D ESCOBAR, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 2495 SW 162 TERRACE
MIRAMAR, FL 33027

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT

The name and address of the initial registered agent is:

ALEJANDRO ESCOBAR 2495 SW 162 TERRACE MIRAMAR, FL 33027

<u>ARTICLE V - INCORPORATORS</u>

follows:	o) signed these Alti	cies of incorporation are as	
Name: ALEJANDRO ESCOBAR			·
Address: 2495 SW 162 TERRACE			-
City: MIRAMAR	State: FL	Zip:33027	
Name: DANIELLA ESCOBAR	-		
Address: 2495 SW 162 TERRACE			•
City: MIRAMAR	State: FL	Zip:33027	
Name:			
Address:			
City:	State:	Zip:	
IN WITNESS WHEREOF, the undersi	igned subscriber(s)	have executed these	=
Articles of Incorporation this5_ day			
		•	· ·-—
	HTV.	(Seal)	
	Venella Esca	Ver (Seal)	
		(Seal)	
	-	· · · · · · · · · · · · · · · · · · ·	
STATE OF _FLORIDA) SS	-		
COUNTY OFBROWARD)			<u> </u>
Before me, a Notary Public authorized	to take acknowled	gements in the State and	
County set forth above, personally app	eared	9	
ALEJANDRO & DANIELLA ESCOE			
Known to me and known to the be pers	on(s) who executed	the foregoing Articles of	
Incorporation, and who acknowledged	hefore that TH	EY executed	
these Articles Of Incorporation.	DCIOIC tH#t111	Executed	
IN WITNESS WHEREOF, I have here	unto affixed my ha	and and seal, in the State	
and County aforesaid, this _5 day of	JUNE, 2000		
 	Da si M	le Donely	
	(Notary Public,	State of Florida at large)	
(Notary Seal)		-	
•			

MICHELLE ROSA-GONZALEZ

MY COMMISSION # CC 737366

EXPIRES: April 26, 2002

1-8003-NOTARY Fla Notary Service & Bonding Co

My Commission expires: APRIL 26,2002

B. Officers:

President: ALEJANDRO ESCOBAR Address: 2495 SW 162 TERRACE MIRAMAR, FL 33027

Vice President: Address:

Secretary: DANIELLA ESCOBAR Address: 2495 SW 162 TERRACE

MIRAMAR, FL 33027

Treasurer: Address:

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

Name and Street address of Florida registered agent:

Name: ALEJANDRO ESCOBAR

Office Address: 2495 SW 162 TERRACE

City: MIRAMAR State: FL

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Zip: 33027

Registered agent's signature:

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 indoprorated.

(Signature of Chairman, Vice Chairman, or any officer listed in application) ALEJANDRO ESCOBAR, PRESIDENT

(Name and capacity of person signing application)

<u>CERTIFICATE OF DESIGNATION</u> REGISTERED AGENT/REGISTERED OFFICER

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: A & D ESCOBAR, INC.

	address of the registered agent and offic NDRO ESCOBAR	e is:
(Name)		
2495 SW 162	TERRACE	-
(P.O. Box NO	Γ Acceptable)	TASS
MIRAMAR, I	FL 33027	OO JUL SECAË TALLAH
(City/State/Zij		-5 P
	Signature:	M 2:2
	Title: _PRESIDENT	<u>⊕</u>
	Date: June 5, 2000	-
the above state hereby accept capacity. I fu	named as registered agent and to accept so e corporation at the place designated in the the appointment as registered agent and other agree to comply with the performanith and accept the obligations of my position.	his certificate, I agree to act in this ace of my duties, and I

REGISTERED AGENT FILING FEE: \$35.00

Date: _____June 5, 2000_____