

TRANSMITTAL LETTER

P010000015081

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

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-02/08/01--01108--020
*****87.50 *****87.50

SUBJECT: AREPAS LA MONTAÑA FOOD CORP.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles 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

ADDITIONAL COPY REQUIRED

FROM: CLAUDIA GAVIRIA
Name (Printed or typed)

1420 Gemini Boulevard Suite #3
Address

ORLANDO, FLORIDA 32837
City, State & Zip

(407) 852-0340
Daytime Telephone number

FILED
01 FEB -8 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Feb 2/9
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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

AREPAS LA MONTAÑA FOOD Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

*1420 GEMINI BOULEVARD Suite #3
ORLANDO, FLORIDA 32837*

ARTICLE III SHARES

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

1,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS


The name and Florida street address of the initial registered agent are:

*GEOVANNY SEPULVEDA
3700 34th Street Suite 100
ORLANDO, FLORIDA 32805*

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

*GEOVANNY SEPULVEDA
3700 34th Street Suite 100
ORLANDO, FLORIDA 32805*


Signature/Incorporator

2/2/2001
Date

(An additional article must be added if an effective date is requested.)

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


Signature/Registered Agent

2/2/2001
Date

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01 FEB - 8 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA