# P01000034016

## Florida Department of State

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To:

Division of Corporations

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From:

Account Name

: BARINAS & ASSOCIATES INC.

Account Number : 120000000082

Phone

: (305)871-0889

Fax Number : (305)870-9623

## FLORIDA PROFIT CORPORATION OR P.A. JIMENEZ DE PENA INC

Certificate of Status	1
Certified Copy	0
Page Count	04 (6)
Estimated Charge	\$78.75

B. McKnight

**APR 0 4 2001** 



April 2, 2001

BARINAS & ASSOCIATES INC.

SUBJECT: JIMENZZ DE PENA INN

REF: W01000007323

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

THE REGISTERED AGENTS SIGNATURE ON THE CERTIFICATE PAGE IS 100 LITE MAKING IT NOT LEGIBLE.

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

# ARTICLES OF INCORPORATION

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

ARTICLE ! NAME

The name of the corporation shall be:

JIMÉNEZ DE PENA INC

ARTICLE II PRINCIPAL OFFICE

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

8360 SW 8TH ST MIAMI FL 33144

ARTICLE III SHARES

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

100 SHARES AT \$1.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

> ALIDA DE PENA 11173 SW 88TH ST APT F106 MIAMI FL 33176

## ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation Is(are):

## **ALIDA DE PENA** 11173 SW 88TH ST APT F106 **MIAMI FL 33176** ARTICLE VI OFFICERS/DIRECTORS

PRESIDENT: ALIDA DE PENA

The undersigned incorporator( s)	has( have) executed these Articles of
Incorporation this	, , , , , , , , , , , , , , , , , , , ,

30**TH** MARCH ., 2001 day of

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

Olida de Pera Signature 

Signature

Signature

## Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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.

The name of the corporation is:

### JIMÉNEZ DE PENA INC

1. The name and address of the registered agent and office is:

#### ALIDA DE PENA

(NAME)

11173 SW 88TH ST APT F106

(P.O. BOX OR MAIL DROP BOX NOT ACCEPTABLE)

**MIAMI FL 33176** 

(CITY/STATE/ZIP)

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.

alida De Pero

03/30/01

APR-04-01 09:22 PM BARON.B.B.BARINAS - 1 305 8709623

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