

TRANSMITTAL LETTER

PO2000026989

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

000005043240--0  
-03/05/02--01026--001  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Paella Custom Catering, inc  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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**

FILED  
02 MAR -5 PM 1:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FROM: Frederico L. Perez  
Name (Printed or typed)

2964 SW 7 ST MI.  
Address

MIAMI FLA 33135  
City, State & Zip

786 4021214 - 786 586 6770  
Daytime Telephone number

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

8/3/12

# 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:

PEALLA CUSTOM CATERING, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2964 SW 7TH STREET  
MIAMI, FLORIDA 33143

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SPECIALIZING IN ALL CATERING EVENTS, AND ANY AND ALL LAWFUL BUSINESS.

## ARTICLE IV SHARES

The number of shares of stock is:

1000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ALFREDO PEREZ  
2964 SW 7th STREET  
MIAMI, FL 33143

## ARTICLE VII INCORPORATOR

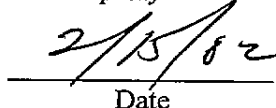
The name and address of the Incorporator is:

ALFREDO PEREZ  
2964 SW 7TH STREET  
MIAMI, FL 33143

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date

FILED  
02 MAR -5 PM 1:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA