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CORPORATION NAME(s) & D	OCUMENT NUMBER(S) (if known):		
11AS CURIEL	ITAS RESTAURANT INC		
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OTHER FUNGS	REGISTRATION/		
Annual Report	QUALIFICATION		
Fictitious Name	Foreign		
Name Reservation	Limited Partnership		
	Reinstatement		
	Trademark		

Other

Examiner's Initials

CR2E031(9/92)

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 I - NAME

The name of the corporation shall be:

Las Curielitas Restaurant Inc

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II - PRINCIPAL OFFICE

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

14520 6W 295 St Homestead FC 33033

ARTICLE III -SHARES

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

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Maria Barbara Curich 14520 SW 295 St Homes Had ET 33833

ARTICLE V - INCORPORATOR

The name and street a	iddress of the	incorporator to	these Articles of
Incorporation is: 🎤			

Haria Barbara Curiel 14520 600 245 37 Homestead TC 33033

The undersigned incorporator has executed these Articles of Incorporation this ____ day of _____ 20___

Signature

03 JUL 11 PH 2: 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI- DIRECTOR(S)

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

Maria Burbara Curiel President 14520 SW 295 St Homestead Fl 33033

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature