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FILED
03 JUL 28 PM 4:48
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: LA DOLCE VITA, CORP.
(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

FROM: Maria Ramirez
Name (Printed or typed)

899 N.W. 37 AVE.
Address

DeLray Beach, FL. 33445
City, State & Zip

561-495-3976
Daytime Telephone number

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



03 JUL 28 PM 1:55

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 17, 2003

MARIA RAMIREZ
899 NW 37 AVE
DELRAY BCH, FL 33445

SUBJECT: LA DOLCE VITA, CORP
Ref. Number: W03000020433

We have received your document for LA DOLCE VITA, CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White
Document Specialist
New Filings Section

Letter Number: 903A00042084

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

CAPRICHOS CORP.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

899 N.W. 37 AVE.
DELRAY, FL 33445

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CATERING (PASTRIES - Food etc

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MARIA RAMIREZ
PRES/Treas/V.P./SEC

ARTICLE VI REGISTERED AGENT

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

EDGAR DURAN
1336 S. MILHARY TR.
STC F
W.P.B FL 33415

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARIA RAMIREZ
899 N.W. 37 AVE
DELRAY FL 33445

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