

P03000137020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

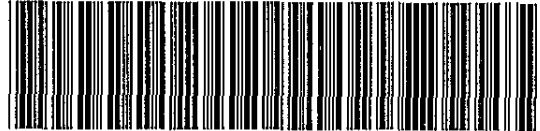
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10/06/03--01047--012 **78.75

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03 NOV 19 AM 10:12
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: EL BOHIO MEAT MARKET AND LECHONERA INC.
(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: OLDALIS ROSADO
Name (Printed or typed)
5250 BON VIVANT DR.
Address
TAMPA, FL. 33603
City, State & Zip

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 24, 2003

RALPH PEREZ 2ND ML
10921 AIRVIEW DR.
TAMPA, FL 33625

SUBJECT: EL BOHIO MEAT MARKET LECHONERA INC.
Ref. Number: W03000029069

We have received your document for EL BOHIO MEAT MARKET LECHONERA INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 245-6962.

Valerie Ingram
Document Specialist
New Filings Section

Letter Number: 903A00055148

ARTICLES OF INCORPORATION

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

FILED

03 NOV 19 AM 10:12

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ARTICLE I NAME

The name of the corporation shall be:

EL BOHIO MEAT MARKET LECHONERA INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5006 E. sligh ave.
TAMPA, FL. 33617

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE CORPORATION SHALL ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED
UNDER THE LA W OF THE UNITED STATES AND THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

7,000
SEVEN THOUSAND

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ANDRES ROSADO
5250 bon vivant dr.
TAMPA, FL. 33603

ARTICLE VI REGISTERED AGENT

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

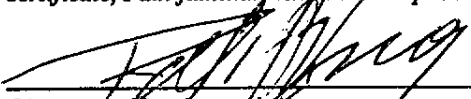
RALPH PEREZ
10921 AIRVIEW DR.
TAMPA, FL. 33625

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

OLDALIS ROSADO
5250 BON VIVANT DR.
TAMPA, FL. 33603

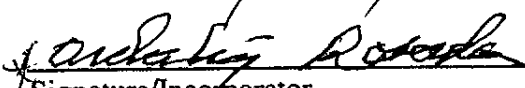
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

9/16/02

Date



Signature/Incorporator

9/16/03

Date