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TRANSMITTAL LETTER

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

SUBJECT: LA	S AMERICAS BAKERY OF	•		
	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)	
			,	
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	l a check for:	
□ \$70.00 Filing Fee	•	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$3 \$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED	
FROM: _	DIEGO M. CARDONA	e (Printed or typed)		
	569 WECHSLER CIR. ORLANDO, FL 32824	Address		
	City, State & Zip			
	(407) 697-9054			
	Daytime Telephone number			

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

ARTICLES OF INCORPORATION

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

<u>ARTICLE I</u> NAME

The name of the corporation shall be:

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SEChELANT OF MALE TALLAHASSEE, FLORIDA

LAS AMERICAS BAKERY OF ORLANDO, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

569 WECHSLER CIR. ORLANDO, FL 32824

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

TO OPERATE A BAKERY & restaurant business

ARTICLE IV SHARES

The number of shares of stock is:

ONE THOUSAND (1,000) COMMON - NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DIEGO M. CARDONA

569 WHECSLER CIR.

ORLANDO, FL

32824

EDGAR BARBOSA

569 WECHSLER CIR.

ORLANDO, FL

32824

REGISTERED AGENT

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

DIEGO M. CARDONA

569 WECHSLER CIR.

ORLANDO, FL

32824

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DIEGO M. CARDONA

ORLANDO, FL 569 WECHSLER CIR.

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

nature/Registered Agent

1 - 13 - 04 Date

Signature/Incorporator