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(Requestor's Name)
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(Business Entity Name)
(Document Number)
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FILED 05 MAR 14 PM 3: 19 TY OF STATE

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TRANSMITTAL LETTER

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

SUBJECT: QUISQUEYA FOOD STORE, 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	\$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL CO	PY REQUIRED
	-

JUAN KIOS FROM: _ Name (Printed or typed) 3421 RESS Sr. 05 MAR 14 PH 3: 19 FL 33607 City, State & Zip IAmpa FILED 813-879-1040 Daytime Telephone number

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

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

ARTICLE I NAME

. . . ,

The name of the corporation shall be:

QUISQUEYA FOOD STORE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3418 W CHEROKEE AVE TAMPA FL 33611

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL ACTIVITY ALLOWED IN FLORIDA

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):

JOSE GARCIA - 3418 W CHEROKEE AVE, TAMPA, FL 33611, PRES SOCORRO GARCIA-3418 W CHEROKEE AVE, TAMPA, FL 33611, VP

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

JUAN Rios
3421 W CYPRESS ST
TAMPA FL 33607

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JUAN Rios 3421 W Cyfress ST TAMPA, FL 33607

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

ature/Registered Agent

nature/Incorporator

31×105

Date