P0500159032

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(ousiness Endry Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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COVER LETTER

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

SUBJECT: Macon	do import, inc		
	(PROPOSED CORPORA	TE NAME - MUST INCL	DDE SUFFIX)
Enclosed are an original	and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00	3\$78.75	\$78.75	S87.50
	iling Fee	Filing Fee	Filing Fee,
	c Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
		ADDITIONAL CO	Status
		ADDITIONAL CO	FI REQUIRED
FROM: Grac	iela M. Rosser		
	Name	e (Printed or typed)	-
11:	59 NW 136 Ave		
		Address	
B.42	: El 00400		
Mi	ami, FL 33182	, State & Zip	
	City	d member our marks	
786	5-553-4842		
		Telephone number	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 23, 2005

GRACIELA M ROSSER 1159 NW 136 AVE MIAMI, FL 33182

SUBJECT: MACONDO IMPORT, INC

Ref. Number: W05000052201

We have received your document for MACONDO IMPORT, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated in your document is not an active entity according to our records. Please reinstate this entity (call (850) 245-6059 for information) or designate another entity that is active according to our records.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2006 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

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) 245-6955.

Suzanne Hawkes Document Specialist NEW FILINGS

Letter Number: 205A00068937

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

ARTICLEI NAME

The name of the corporation shall be:

Macondo Import, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4203 W 16 Ave Hialeah, FL 33012

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail Store

ARTICLE IV SHARES

The number of shares of stock is:

\$10,000.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Miguel P. Simon - President Rosa I. Fuentes - Vice-President

REGISTERED AGENT

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

Graciela M. Rosser 1159 NW 136 Ave Miami, FL 33182

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Graciela M. Rosser 1159 NW 136 Ave Miami, FL 33182

************************ ed agent to accept service of process for the above stated corporation at the place designated in this and accept the appointment as registered agent and agree to act in this capacity cartificate, I am fantilla

Date

11/30/2005