

# Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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Account Number: 071001002335 Phone: (305)599-0839

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### FLORIDA PROFIT CORPORATION OR P.A.

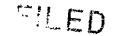
CAFE MONQUITO, INC.

| Certificate of Status | O The state of the |
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# ARTICLES OF INCORPORATION 05 DEC 14 PM 12: 55

TALLAHASSEE, FLORIDA

# CAFÉ MONQUITO, INC.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s)

Competent to contract, hereby form a corporation under the laws of State of Florida.

ARTICLE I-CORPORATE NAME

The name of the corporation is: CAFÉ MONOUITO, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities permitted under the laves of the United States and the State of Florida.

ARTICLE IV-CAPITAL STOCK

The corporation is authorized to issue <u>One hundred</u> shares (100) of <u>five</u> Dollar (s) (\$5.00) par value common stock, which shall be designated "Common Shares".

ARTICLE V-INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and name of the at office is:

| NAME    | RAMON MEDEROS      |       |    |           |  |
|---------|--------------------|-------|----|-----------|--|
| ADDRESS | 8903 NW 145 STREET |       |    | <u> </u>  |  |
| CITY    | MIAMI LAKES        | STATE | FL | ZIP 33018 |  |

The principal office, if known or the mailing address of the corporation is:

| NAME    | RAMON MEDEROS      |       |    |     |       |  |
|---------|--------------------|-------|----|-----|-------|--|
| ADDRESS | 8903 NW 145 STREET |       |    |     |       |  |
| CITY    | MIAMI LAKES        | STATE | FL | ZIP | 33018 |  |

#### ARTICLE VI-INITIAL BOARD OF DIRECTORS

This corporation shall have <u>TWO (2)</u> director initially. The number of directors may be either increased or diminished from time to time by laws but shall never be less than one (1). . . . .

| NAME    | RAMON MEDEROS       |  |
|---------|---------------------|--|
| ADDRESS | 1185 WEST 35 STREET |  |

| CITY    | HIALEAH             | STATE | FLORIDA | ZIP | 33012 |
|---------|---------------------|-------|---------|-----|-------|
| NAME    | IRDELISA MEDEROS    |       |         |     |       |
| ADDRESS | 1185 WEST 35 STREET | Γ     |         |     |       |
| CITY    | HIALEAH             | STATE | FLORIDA | ZIP | 33012 |
| NAME    |                     |       |         | 1 1 |       |
| ADDRESS |                     |       |         |     |       |
| CITY    |                     |       |         |     |       |
| NAME    |                     |       |         |     |       |
| ADDRESS |                     |       |         |     |       |
| CITY    |                     |       |         |     |       |
| NAME    |                     |       |         |     |       |
| ADDRESS |                     |       |         |     |       |
| CITY    |                     |       |         |     |       |

#### ARTICLE VII-INCORPORATORS

The name and addresses of the incorporators signing theses Articles of Incorporation are as follows:

| NAME    | RAMON MEDEROS       |       |         |     |       |
|---------|---------------------|-------|---------|-----|-------|
| ADDRESS | 1185 WEST 35 STREET |       |         |     |       |
| CITY    | HIALEAH             | STATE | FLORIDA | ZIP | 33012 |
| NAME    | IRDELISA MEDEROS    |       |         |     |       |
| ADDRESS | 1185 WEST 35 STREET |       |         |     |       |
| CITY    | HIAELAH             | STATE | FLORIDA | ZIP | 33012 |
| NAME    |                     |       |         |     |       |
| ADDRESS |                     |       |         |     |       |
| CITY    |                     |       |         |     |       |
| NAME    |                     | :     |         |     |       |
| ADDRESS |                     |       |         |     |       |
| CITY    |                     |       |         | •   |       |
| NAME    |                     |       |         |     |       |
| ADDRESS |                     |       |         |     |       |
| CITY    |                     |       |         |     |       |

| in witness           | WHERE OF, the undersigned                   | subscriber (s) have executed th | ese Articles of |
|----------------------|---|---------------------------------|-----------------|
| Incorporation t      | his 13TH day of December.                   | 2005.                           | . 5             |
| The same of the same | 2004 40001111111111111111111111111111111    |                                 |                 |
| PREPAREU:            | SOSA ACCOUNTING TAX 8<br>570 EAST 49 STREET | SERVICE MA                      | ( Scal)         |
|                      | HIALEAH, FL 33013                           | Do designed                     | ( Seal)         |
|                      | (305) 688~1716                              |                                 |                 |
|                      | (395) 688 – 1714                            |                                 | ( Seal)         |
|                      |   | <u></u>                         | ( Seal)         |
|                      |   |                                 | (Seal)          |

# CERTIFICATE AND ACKNOWLEDGEMENT 65 DEC 14 PM 12: 55

TALLAHASSEE, FLORIDA

egistered agent)

#### CERTIFICATE OF REGISTERED AGENT

OF

## CAFÉ MONQUITO, INC.

(name of corporation)

Pursuant to Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, to organize under the laws of the State of Florida with Its registered office as indicated in the Articles of Incorporation.

| AT:       | 8903 NW 145 STREET    | <u> </u> |
|-----------|-----------------------|----------|
| L.,       | MIAMI LAKES, FL 33018 |          |
| Has named | RAMON MEDEROS         |          |

Located at the aforesaid address, as its Registered Agent to accept service of process within this state.

#### ACKNOWLEDGEMENT

Having bee named as Registered Agent to accept service of process for the above state corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with provisions of Florida Lawn in Keeping open said office.