

PO6000 109513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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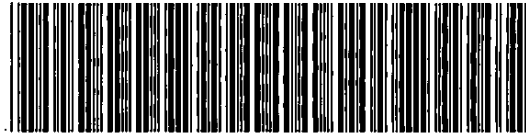
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

pa

## TRANSMITTAL LETTER

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

**SUBJECT:** Linares Investments & Bistro Cafe, 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  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Odalys Linares

Name (Printed or typed)

4815 SW 20th Street

Address

Fort Lauderdale, FL 33317

City, State & Zip

(954) 792-0923

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)

### **ARTICLE I NAME**

The name of the corporation shall be:

Linares Investments & Bistro Cafe, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

6363 NW 6 Way, Ste. 160, Fort Lauderdale, FL 33309

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Professional Corporation

### **ARTICLE IV SHARES**

The number of shares of stock is:

100

### **ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

Odalys Linares, 4815 SW 20th Street, Fort Lauderdale, FL 33317, President

### **ARTICLE VI REGISTERED AGENT**

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

Odalys Linares, 4815 SW 20th Street, Fort Lauderdale, FL 33317, President

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Odalys Linares, 4815 SW 20th Street, Fort Lauderdale, FL 33317, President

\*\*\*\*\*  
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

8-16-06  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

8-16-06  
\_\_\_\_\_  
Date

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TALLAHASSEE, FLORIDA