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(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	_ Certificates	s of Status		
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07 JUN 22 AH 9: 42 SECRETARY OF STATE ALLAMASSE PESTATE



COVER LETTER

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

SUBJECT: EL	RINCON CAFETERIA I		
Enclosed are an orig	(PROPOSED CORPORATE) ginal and one (1) copy of the artic		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	M: KARINA HITO Name (Printed or typed)		
	1989 NE 173 S	TREET	
	NORTH MIAMI BEACH, FL 33162 City, State & Zip		
	786-715-9 Daytime To	9901 elephone 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:

EL RINCON CAFETERIA INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5722 WASHINGTON STREET HOLLYWOOD FL 33023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOOD SERVICE

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

KARINA HITO (PRESIDENT) 1989 NE 173 STREET NORTH MIAMI BEACH, FL 33162

ARTICLE VI REGISTERED AGENT

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

NAVARRO BUSINESS OFFICE 1170 SW 6 STREET MIAMI FL 33130

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

KARINO HITO 1989 NE 173 STREET NORTH MIAMI BEACH, FL 33162

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

Ediel navarno	06/13/2007
Signature/Registered Agent	Date
1 anino (1 its)	06/13/2007
Signature/Incorporator	Date

O7 JUN 22 AH 9: 42 SECRETARY OF STATE TALLAHASSEE, FI ORIDA