



**COVER LETTER**

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

**SUBJECT: Vargas - Cirigliano Corporation**  
**(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: Milton Vargas  
Name (Printed or typed)

811 NE 199th Street #107  
Address

Miami, Florida, 33179  
City, State & Zip

(786) 587-4207 / (305) 761-5653  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 3, 2007

MILTON VARGAS  
811 NE 199TH STREET #107  
MIAMI, FL 33179

SUBJECT: VARGAS-CIRIGLIANO CORPORATION  
Ref. Number: W07000048953

We have received your document for VARGAS-CIRIGLIANO CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return 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 850-245-6052.

Paisley A Alford  
New Filing Section  
Division of Corporations

Letter Number: 107A00057825

**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:

**Vargas - Cirigliano Corporation**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

811 NE 199th Street #107 N Miami Beach, FL, 33179

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Food Service

**ARTICLE IV SHARES**

The number of shares of stock is:

50-50

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Milton Vargas, 811 NE 199th Street #107 N  
Miami Beach, FL, 33179 - Director

Gustavo Federico Cirigliano, 1710 NE 191th  
Street, N Miami Beach, FL, 33179 - Director

FILED  
07 OCT 15 AM 9:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:  
I hereby am familiar with and accept the duties and responsibilities of Registered Agent.  
Milton Vargas, 811 NE 199th Street #107 N Miami Beach, FL, 33179

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:  
I hereby am familiar with and accept the duties and responsibilities of Incorporator.  
Milton Vargas, 811 NE 199th Street #107 N Miami Beach, FL, 33179

\*\*\*\*\*  
*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

\_\_\_\_\_  
10-10-07

Date



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

\_\_\_\_\_  
10-10-07

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA