

# Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name : FASTKIT CORPORATE OUTFITS

Account Number : 071001002335 Phone : (305)599-0839 : (305)716-0346 Fax Number

FLORIDA PROFIT/NON PROFIT CORPORATION

MAMA MI VIDA TRANSPORTATION CORP.

| Certificate of Status | 0       |
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| Certified Copy        | 1       |
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Corporate Filing Menu

Help

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7/9/2008

#### ARTICLE OF INCORPORATION

OE.

MAMA MI VIDA TRANSPORTATION CORP.

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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

## ARTICLE I NAME

The name of the corporation shall be: MAMA MI VIDA TRANSPORTATION CORP.

The principal place of business of this corporation shall be: 641 E. 41 ST.
HIALBAH, WL. 33013

## ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

 $100 \times $10.00 = $1,000.00$ 

### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

## ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

FLOR M. VIVES 641 E. 41 ST. HIALEAH, FL. 33013 DIRECTOR

## ARTICLE VI INCORPORATOR (S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

FLOR M. VIVES 641 E. 41 ST. HIALEAH, FL. 33013 PRESIDENT, SECRETARY & TREASURER
100 shares

The undersigned has(have) executed these Article of Incorporation this \_7 th. day of July \_\_\_\_\_\_\_.2008 \_\_\_\_

Signature/Title

Signature/Title

Signature/Title

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## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

| age                                 | at, in the State of Florida.   |
|-------------------------------------|--|
|                                     | :  |
| ı.                                  | The name of the corporation is:_   |
|                                     | MAMA MI VIDA TRANSPORTATION CORP.  |
|                                     |  |
| 2.                                  | The name and address of the registered agent and office  |
|                                     | is FLOR M. VIVES   |
|                                     | (Name)   |
|                                     |  |
|                                     | (P. O. BOX NOT ACCEPTABLE)   |
|                                     | , (¢, 0: box 1101 x0001 11010)   |
|                                     | HIALEAH, FLORIDA 33013   |
|                                     | (CITY/STATE/ZIP)   |
|                                     |  |
|                                     |  |
| OF E<br>AS S<br>THES<br>RELA<br>AND | TWO BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNERS. FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNERATE TO AGREE TO ACT IN THIS CAPACITY. I FURTHER TO COMPLY WITH THE PROVISIONS OF ALL STATUTES ATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY STION AS MY POSITION AS REGISTERED AGENT. |
|                                     | DATE 7-7-08  |
|                                     |  |