## 78000104649

•		
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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Office Use Only



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## **COVER LETTER**

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

SUBJECT: Lope Z Produ (PROPOSED CORPORA)	ice Inc	
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u> )	
Enclosed are an original and one (1) copy of the artic	eles of incorporation and a check for:	
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50  Filing Fee Filing Fee, & Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED	
FROM: Trene of Lopez  Name (Printed or typed)		
1040 NW 9 Cf Address		
Homestead Fl- 33030 City, State & Zip		
786-234-29-15  Daytime Telephone number		

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 19, 2008

IRENEO LOPEZ 1040 NW 9TH CT. HOMESTEAD, FL 33030

SUBJECT: LOPEZ PRODUCE INC.

Ref. Number: W08000052589

We have received your document for LOPEZ PRODUCE INC. 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 state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of 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) 245-6995.

Wanda Cunningham Regulatory Specialist II New Filing Section

AND LONG THE CONTRACT

Letter Number: 308A00057819

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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:  LOPEZ Produce INC.  ARTICLE II PRINCIPAL OFFICE
ARTICLE I NAME  The name of the corporation shall be:  ACCRETAGE  A 3:35
Lopez Produce INC.
The principal street address and mailing address, if different is:
Homestead-Fl 3303U  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:
·
ARTICLE IV SHARES The number of shares of stock is:  N ( A
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):
Ireneo Copez
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Homestead. Fl 33030 - Ireneo Copez
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is:  1040 NW 9CF  Itome Stead. F1. 33030  Trened Copez
**************************************
Signature/Pagistared Agent
Signature/Registered Agent Date
Signature/Incorporator Date