

PO90004/6/3

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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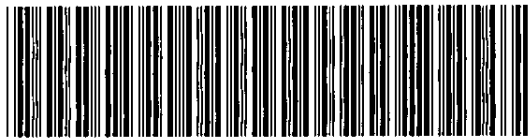
(Business Entity Name)

(Document Number)

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09 MAY 11 AM 10:34  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

EP5/12/09

ECFS

EXPRESS CORPORATE FILING SERVICE, INC  
1000 PONCE DE LEON BLVD., STE: 101  
CORAL GABLES, FL 33134  
PH: (305)444-4994 FAX: (305)444-4977

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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. COPELITA TROPICAL CORP.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in

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NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF INCORPORATION**  
**FOR**

***COPPELITA TROPICAL, CORP.***

FILED  
09 MAY 11 AM 10:36  
STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE I**

The name of the corporation shall be:

***COPPELITA TROPICAL, CORP***

**ARTICLE II**

This corporation shall commence existence upon the date of filing with Division of Corporations, state of Florida, and shall have perpetual existence.

### **ARTICLE III**

The principal place of business and mailing address of this corporation shall be:

5755 W FLAGLER ST # 103  
MIAMI FL 33144

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STATE  
TALLAHASSEE, FLORIDA

### **ARTICLE IV**

The general nature of business of this corporation is to transact any and all lawful business in Florida.

### **ARTICLE V**

The aggregate number of shares, which this corporation shall have authority to issue, are 1,000 shares having an individual par value of \$1,000.00 unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

**ARTICLE VI**

The name(s) and address (es) of the initial Registered Agent of this corporation shall be:

Name: Angel Parra  
Address: 4550 NW 9 St. Apt 601  
Miami, Fl 33126

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STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII**

The name and address of the officers and initial board of directors shall be:

Angel Parra-----President  
Address: 4550 NW 9 St Apt 601  
Miami, Fl 33126

Violet Parra-----Vice-President  
Address: 4550 NW 9 St Apt 601  
Miami, Fl 33126

## ARTICLE VIII

The name and address of the incorporator executing these  
Articles of Incorporation are:

Name: Angel Parra

Address: 4550 NW 9 St Apt 601  
Miami, Fl 33126

  
Signature

Name: Violet Parra

Address: 4550 NW 9 St Apt 601  
Miami, Fl 33126

  
Signature

2009 MAY 11 PM 10:35  
STATE OF FLORIDA  
TALLAHASSEE

The undersigned has executed these Articles of  
Incorporation this 07 day of May, 2009

**ARTICLE IX**

Shareholders:


Name: Angel Parra  
Address: 4550 NW 9 St Apt 601  
Miami, Fl 33126  
Shares---50%

Name: Violet Parra  
Address: 4550 NW 9 St Apt 601  
Miami , Fl 33126  
Shares----50%

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

HAVING BEEN NAMED AS REGISTERED AGENT  
AND TO ACCEPT SERVICE OF PROCESS FOR THE  
ABOVE STATED CORPORATION AT THE  
PLACE DESIGNATED IN THE ARTICLES OF  
INCORPORATION, I HEREBY ACCEPT THE  
APPOINTMENT AS REGISTERED AGENT AND  
AGREE TO ACT IN THIS CAPACITY I FURTHER  
AGREE TO COMPLY WITH THE PROVISIONS OF  
ALL ATITUTES RELATING TO THE PROPER  
COMPLETE PERFOMANCE OF MY DUTIES AND I  
AM FAMILIAR WITH AND ACCEPT THE  
OBLIGATIONS POSITION AS REGISTERED AGENT.

  
\_\_\_\_\_  
Registered Agent-Incorporator