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(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. McKnight SEP 29 2009

## COVER LETTER

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

**SUBJECT:** EL HAY BENDITO BBQ & CAFETERIA INC  
(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** MARIA I BARWICK  
Name (Printed or typed)

713 SW ANCONA RD  
Address

PORT ST LUCIE FLORIDA 34953  
City, State & Zip

(954) 624-6271  
Daytime Telephone number

mariaprestige@aol.com  
E-mail address: (to be used for future annual report notification)

**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 Hay Bendito Cafeteria & BBQ Inc.

### **ARTICLE II      PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

713 SW Ancona Rd Port St Lucie, fl 34953

### **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

Mobile food dispensing

### **ARTICLE IV      SHARES**

The number of shares of stock is:

1

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

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

Maria I Barwick - president 713 SW Ancona Rd port St Lucie, FI 34953

Carlos E Roman - vice president 713 SW Ancona Rd port St Lucie, FI 34953

### **ARTICLE VI      REGISTERED AGENT**

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

Maria Barwick 713 SW Ancona Rd port St Lucie, fl 34953.

### **ARTICLE VII      INCORPORATOR**

The name and address of the Incorporator is:

Maria I Barwick      713 SW Ancona Rd port St Lucie, fl 34953

\*\*\*\*\*

*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*

*Maria I. Barwick*

Signature/Registered Agent

9/22/2009

Date

*Maria I. Barwick*

Signature/Incorporator

9/22/2009

Date

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