

P10000004729

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RECEIVED
10 JAN 13 AM 10:40
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
10 JAN 13 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EP 1/19/10

6110000001927

LAZARUS

CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973

Office Use Only

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

1. S & C DISTRIBUTOR OF FLORIDA
(Corporation Name) (Document #)
2. INC.
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2:06 ☒ Certified Copy
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NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 14, 2010

LAZARUS

SUBJECT: S & C DISTRIBUTOR OF FLORIDA, INC.
Ref. Number: W10000001927

We have received your document for S & C DISTRIBUTOR OF FLORIDA, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6062.

Eula Peterson
Regulatory Specialist II
New Filing Section

Letter Number: 810A00001132

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

10 JAN 15 AM 10:51

RECEIVED

ARTICLES OF INCORPORATION
OF

SALAS & C DISTRIBUTOR OF FLORIDA, INC.

FILED
10 JAN 13 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned in accordance with the law of the State of Florida.

ARTICLE I

The name of this corporation shall be:
SALAS & C DISTRIBUTOR OF FLORIDA, INC.

ARTICLE II

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

**3163 NE 4 Street
HOMESTEAD, Florida 33033**

ARTICLES III - SHARES

The number of shares of stock that this corporation is authorized to have Outstanding at nay one time is: One Hundred (100) of One Dollar(s) (1.00)

ARTICLE IV

The name and address of the initial agent is:

**Jorge Francisco Salas
3163 NE 4 ST
Homestead, FL 33033**

ARTICLE V - INCORPORATOR(S)

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

<i>Incorporator Name</i>	<i>Incorporator Address</i>
JORGE FRANCISCO SALAS	3163 NE 4 ST Homestead, FL 33033
CHARLES FRANCISCO SALAS	3163 NE 4 ST Homestead, FL 33033
PABLO GIL	3163 NE 4 ST Homestead, FL 33033
REYNALDO FRANCISCO SALAS	3163 NE 4 ST Homestead, FL 33033

The undersigned incorporator has executed these Articles of Incorporation this 11 day of JANUARY 20 10


Signature


Signature

ARTICLE VI - DIRECTOR(S)

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

JORGE FRANCISCO SALAS - PRESIDENT
3163 NE 4 ST
HOMESTEAD, FLORIDA 33033

CHARLES FRANCISCO SALAS- VICE PRESIDENT
3163 NE 4 ST
HOMESTEAD, FLORIDA 33033

PABLO GIL- TREASURY
3163 NE 4 ST
HOMESTEAD, FLORIDA 33033

REYNALDO FRANCISCO SALAS- SECRETARY
3163 NE 4 ST
HOMESTEAD, FLORIDA 33033

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

*Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statute,
the Undersigned Corporation, organized under the laws of the State of Florida,
submits the following statement in designating the registered agent, in the
State of Florida.*

1. *The name of the corporation is: SALAS & C DISTRIBUTOR OF FLORIDA, INC.*
2. *The name and address of the registered agent and office is:*

**JORGE FRANCISCO SALAS
3163 NE 4 ST
HOMESTEAD, FLORIDA 33033**

*Having been named as Registered agent and to accept service of process for the
above stated corporation at place designated in this certificate, 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 statutes related to the proper and
complete performance of my duties, and I am familiar with and accept the
obligations of my position as Registered Agent.*


Registered Agent Signature

1/11/2010
Date