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2010 DEC 28 PM 4:42
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: MR TEQUILA RESTAURANT 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 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: **RAFAEL ROMO**

Name (Printed or typed)

311 LINDEN DR

Address

ELLENTON, FL 34222

City, State & Zip

678-364-9441

Daytime Telephone number

SMURER@SUPERIOR-BOOKKEEPING.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:

MR TEQUILA RESTAURANT INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
908 NW 69TH TERRACE
GAINSVILLE, FL 32605

Mailing address, if different is:

PO BOX 2689
PEACHTREE CITY, GA 30269

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: **1000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **RAFAEL ROMO/PRESIDENT**
Address: **311 LINDEN DR**
ELLENTON, FL 34222

Name and Title: _____
Address: _____

Name and Title: **EDUARDO PLASENCIA ROMO/VP**
Address: **3126 TAMiami TRAIL N**
NAPLES, FL 34103

Name and Title: _____
Address: _____

Name and Title: **RICARDO ROMO FUENTES/SEC**
Address: **2100 CASS RD**
MAUMEE, OH 43537

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: **RAFAEL ROMO**
Address: **311 LINDEN DR**
ELLENTON, FL 34222

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **RAFAEL ROMO**
Address: **311 LINDEN DR**
ELLENTON, FL 34222

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

Rafael Romo F.

Required Signature/Registered Agent

12-27-10

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Rafael Romo F.

Required Signature/Incorporator

12-27-10

Date

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CLERK OF SUPERIOR COURT
TAMPA, FLORIDA