

P11000033131

Florida Department of State
Division of Corporations
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A/ 46863

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

RECEIVED
11 APR -4 PM 3:38
DIVISION OF CORPORATIONS

FLORIDA PROFIT/NON PROFIT CORPORATION
LAMA'S TAPIZERIA INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
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11 APR -4 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME LAMA'S TAPIZERIA INC.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

5828 W 18 AVE

HIALEAH, FL 33012

Mailing address, if different is:

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: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: P-MARCOS A. LAMAS

Address: 5828 W 18 AVE

HIALEAH, FL 33012

Name and Title:

Address:

Name and Title: VP- BARBARA E. ALVAREZ

Address: 5828 W 18 AVE

HIALEAH, FL 33012

Name and Title:

Address:

Name and Title:

Address:

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: MARCOS A. LAMAS

Address: 5828 W 18 AVE

HIALEAH, FL 33012

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: BARBARA E. ALVAREZ

Address: 5828 W 18 AVE

HIALEAH, FL 33012

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



Required Signature/Registered Agent

4/4/2011

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.



Required Signature/Incorporator

4/4/2011

Date

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