

P110000052656

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

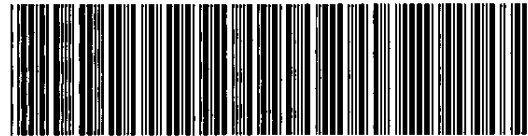
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/03/11--01011--016 **78.75

11 JUN -3 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

1/4

COVER LETTER

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

SUBJECT: GUADALUPE'S GOURMET DIET CORP
(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: GUADALUPE FOCIL
Name (Printed or typed)

2859 BIRD AVE
Address

MIAMI FL 33133
City, State & Zip

305-3920682
Daytime Telephone number

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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be:

GUADALUPE'S GOURMET DIET CORP

11 JUN -3 AM 10:45

ARTICLE II PRINCIPAL OFFICE

Principal street address
2859 BIRD AVE
MIAMI FL 33133

SECRETARY OF STATE
MAILING ADDRESS
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOOD SERVICES

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **DIEGO MERIZALDE - PRESIDENT**
Address: **2859 BIRD AVE**
MIAMI FL 33133

Name and Title: _____
Address: _____

Name and Title: **GUADALUPE FOCIL - PRESIDENT**
Address: **2859 BIRD AVE**
MIAMI FL 33133

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:

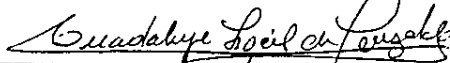
Name: **GUADALUPE FOCIL**
Address: **2859 BIRD AVE**
MIAMI FL 33133

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **GUADALUPE FOCIL**
Address: **2859 BIRD AVE**
MIAMI FL 33133

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

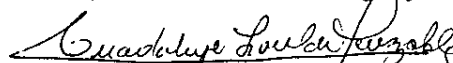


Required Signature/Registered Agent

5/27/2011

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

5/27/2011

Date