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11 AUG 19 PM 2:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: EL GRAN SABOR 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: LOURDES RODRIGUEZ & BELKYN SIMMONS  
Name (Printed or typed)

5425 S.SEMORAN BLVD.1D  
Address

ORLANDO, FL 32822  
City, State & Zip

407-484-4453  
Daytime Telephone number

rlourdesl@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)

APPROVED  
AND  
FILED

**ARTICLE I NAME**

The name of the corporation shall be:

EL GRAN SABOR CORP.

11 AUG 19 PM 2:06

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address

5425 S.SEMORAN BLVD,1D  
ORLANDO, FL 32822

Mailing address

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

SERVICE & SALE OF LATIN FOOD .BUSINESS PLACE AT 4701 S.SEMORAN  
BLVD.ORLANDO,FL 32822.

**ARTICLE IV SHARES**

The number of shares of stock is: TWO

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

Name and Title: BELYKN SIMMONS

Address: 5701 GATLIN AVE,APT.112

Name and Title: LOURDES RODRIGUEZ

Address: 5425 S.SEMORAN BLVD,1D  
ORLANDO,FL 32822

Name and Title:

Address:

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: LOURDES RODRIGUEZ

Address: 5425 S.SEMORAN BLVD,1D  
ORLANDO,FL 32822

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: LOURDES RODRIGUEZ

Address: 5425 S.SEMORAN BLVD,1D  
ORLANDO,FL 32822

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



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



Date