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| (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: | | | | | |
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Office Use Only



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FILED SECRETARY OF STATE VISION OF CORPORATIONS

PS 9/12/11

COVER LETTER

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

| SUBJECT: CANCUN'S ST | earts Bar Inc. RATE NAME-MUST INCLUDE SUFFIX) |
|---|---|
| Enclosed are an original and one (1) copy of the a | rticles of incorporation and a check for: |
| \$70.00 78.75 Filing Fee Filing Fee & Certificate of Status | \$78.75 \$87.50 Filing Fee & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED |
| FROM: Luis Carran | ر me (Printed or typed) |
| 2549 W. T. | ennesse st Address |
| Tallahassee, Ci | |
| 850- 878- Daytime | O35) e Telephone number |
| E-mail address: (to be u | ised for future annual report notification) |

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

FILED CRETARY OF STATE

| ~- | In compliance with Chapter | r 607 and/or Cha | pter 621, F | S. (ProfitiCRETAR | Y OF STATE CORPORATIONS |
|--|---|--------------------------|---------------------|------------------------|---------------------------------------|
| | ME / | | | | |
| The name of the corpor | | Sports | Bar | Ind1 SEP 12 | AM 11: 37 |
| | Principal street address SY9 U Tennys | 84 | N | Mailing address, if di | fferent is: |
| _ <u>a</u> | all. FL 32309 | - - | | SAM | [[<u> </u> |
| ARTICLE III PUT The purpose for which can Restaur | the corporation is organized is: | - | | | |
| The number of shares o | • | anamana | | | |
| Name and Title:_ Address: | TIAL OFFICERS AND/OR DIR Wis Carranza 2012 N. Monroe Tallahassa, FL 3 President | Name 5+ Addr 12303 | ess: | | |
| Name and Title: Address: | | Addr | e and Title ess: | | |
| Name and Title:_ Address: | | Name Addr | e and Title | | |
| | GISTERED AGENT street address (P.O. Box NOT acce Luis Carranza Zozz Ni Monroe Tallahassee, FL 3 | \$+ | istered ager | nt is: | · · · · · · · · · · · · · · · · · · · |
| ARTICLE VII INC The name and address Name: Address: | CORPORATOR softhe Incorporator is: LVIS CAYVANZA ZOZZ N. MONTO 2 Tallahassa FL 3 | \$ + 2303 | | | |
| | s registered agent to accept service of miliar with and accept the appointme | | | | |
| XLVICO | urrarao | | | 9 🕏 | 11-51- |
| <u> </u> | Required Signature/Registered A | gent | | | Date |
| | at and affirm that the facts stated h tment of State constitutes a third deg | | | | mation submitted in a |
| × LUISO | Required Signature/Incorpora | 1 tor | - | 9 | _ 12-11 |