

P1200054518

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

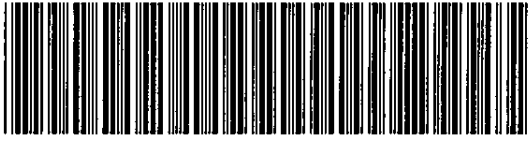
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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936/18/12

SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUN 15 PM 12:57

COVER LETTER

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

SUBJECT: _____
(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: Hector M. Molleda
Name (Printed or typed)

691 W 53rd Street
Address

Hialeah, Florida 33012
City, State & Zip

786-210-7898
Daytime Telephone number

Hmolleda@yahoo.com
E-mail address: (to be used for future annual report notification)

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

FILED

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME Metropolitan Vending Group Corporation

The name of the corporation shall be:

12 JUN 15 PM 12:57

ARTICLE II PRINCIPAL OFFICE

Principal street address
691 W 53rd Street
Hialeah, Florida 33012

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To transact any and all lawful business for which corporations may be organized under the laws of the State Of Florida, and to have all powers which are afforded to corporations under the laws of the State Of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 600

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Hector M. Mollada, President

Address: 691 W 53rd Street
Hialeah, Florida 33012

Name and Title: _____

Address: _____

Name and Title: Ronald R. Fernandez, Vice-President

Address: 691 W 53rd Street
Hialeah Florida 33012

Name and Title: _____

Address: _____

Name and Title: Yend Rodriguez, Secretary/treasurer

Address: 691 W 53rd Street
Hialeah, Florida 33012

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: Hector M. Mollada
Address: 691 W 53rd Street
Hialeah, Florida 33012

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Hector M. Mollada
Address: 691 W 53rd Street
Hialeah, Florida 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

06/11/12

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

06/11/12

Date