

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION MISTER RESTAURANT EQUIPMENT, INC.

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Corporate Filing Menu

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3/5/2013

ARTICLES OF INCORPORATION H 1300005 18 17

name of the corporati		RANT EQU	IPMENT, INC.	
	CIPAL OFFICE Principal street address VINE WAY	Ма	iling address, if different is:	
AVIE, FL 333	331			.
TICLE III PURF purpose for which th	OSE e corporation is organized is: ANY AN	D ALL LAV	VFUL BUSINES	S
		<u> </u>		
RTICLE IV SHA	RES 1000			13 MAR -6
TICLE V INT	IAL OFFICERS AND/OR DIRECTORS	· ·		WHII:
Name and Title	SIMONIDES IGNACIO DOMINGUEZ (P)	Name and Title:		<u></u>
Address	4711 GRAPEVINE WAY	Address:		-(
	DAVIE, FL 33331	- -		
Name and Title:		Name and Title:		
Address		Address:		· · · · · ·
		_		
Name and Title:				

To: 18506176381

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(conti.)

Name and	f Title:	Name and Title:
Address		Address:
ARTICLE VI The name and Fl	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	SIMONIDES IGNACIO DOMINGUEZ	
Address:	4711 GRAPEVINE WAY	MAR -
A ALICAL CISCS.	DAVIE, FL 33331	6, F\$.
ARTICLE VII The name and ad Name:	INCORPORATOR Idress of the Incorporator is: SIMONIDES IGNACIO DOMINGUEZ	AMII: 59
Address:	4711 GRAPEVINE WAY DAVIE, FL 33331	
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg	• •
	- Cilllifeef v \	03/05/2013
I submit this dog	Required Signature Registered Agent ument and affirm that the facts stated herein are	Date true. I am aware that the false information submitted in a
document to the	Department of State constitutes a third degree felong	o as provided for in \$.817.155, F.S. 03/05/2013 Date