

03/18/2013 09:58

#045 001/03

# P 13000040830

Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H130001018963)))



H130001018963ABC3

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305) 552-5973  
Fax Number : (305) 220-1440

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**

*CAPORAL CHICKEN, INC*

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 03      |
| Estimated Charge      | \$78.75 |

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

13 MAY -6 AM 11:08

RECEIVED

13 MAY -6 PM 4:23

DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

*5/7/13*

H 13000101896

**ARTICLES OF INCORPORATION**

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

13 MAY -6 AM 11:08

**ARTICLE I NAME**The name of the corporation shall be: **CAPORAL CHICKEN, INC****ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

**14616 SW 8TH ST****MIAMI, FL 33184****ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**ARTICLE IV SHARES**The number of shares of stock is: **100****ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: **VINCENT J HERRYMAN( PRESIDENT)**

Name and Title:

Address

**14616 SW 8TH STREET**

Address:

**MIAMI, FL 33184**

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

H 13000101896

(cont.)

H 13000101896

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

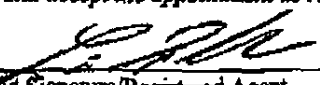
**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: LUIS ROSALES  
Address: 5931 NW 173 ST, STE 9  
MIAMI, FL 33015

**ARTICLE VII INCORPORATOR**The name and address of the incorporator is:

Name: LUIS ROSALES  
Address: 5931 NW 173 ST, STE 9  
MIAMI, FL 33015

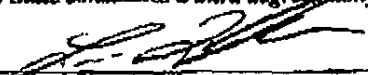
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

  
\_\_\_\_\_  
Required Signature/Registered Agent

5-3-13

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.817.153, F.S.

  
\_\_\_\_\_  
Required Signature/Incorporator

5-3-13

Date

H 13000101896

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 MAY -6 AM 11:08