

P/3000071321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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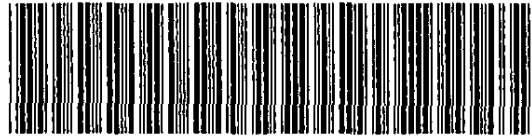
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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13 AUG 23 PM 4:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch AUG 28 2013

**COVER LETTER**

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

**SUBJECT: AL DENTE CAPITAL, INC**

(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: ANDRES S MARTIN**

Name (Printed or typed)

**3791 BRANTLEY PLACE CIRCLE**

Address

**APOPKA, FL 32703**

City, State & Zip

**407-578-6247**

Daytime Telephone number

**AMARTIN@ALDENTECAPITAL.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)

**ARTICLE I NAME**

The name of the corporation shall be: AL DENTE CAPITAL, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

3791 BRANTLEY PLACE CIR

APOPKA, FL 32703

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: CONSULTING AND INVESTMENTS

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: ANDRES MARTIN, PRESIDENT & CEO

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

Address 3791 BRANTLEY PLACE

Address: \_\_\_\_\_

APOPKA, FL 32703

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL 32399

(conti.)

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: ANDRES MARTIN  
Address: 3791 BRANTLEY PLACE CIR  
APOPKA, FL 32703

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: ANDRES MARTIN  
Address: 3791 BRANTLEY PLACE CIR  
APOPKA, FL 32703

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*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*

Andres Martin

Required Signature/Registered Agent

8/15/2013

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.*

Andres Martin

Required Signature/Incorporator

8/15/2013

Date