

71300097003

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

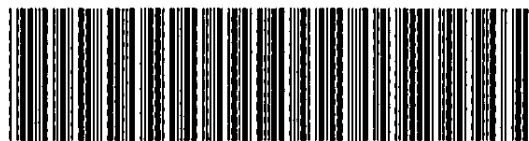
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status ☒

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12/04/13--01029--004 **78.75

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OFFICE OF CORPORATIONS

SL
13573

COVER LETTER

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

SUBJECT: RESTAURANTE LAS COLINAS 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: Martil D. Saucedo
Name (Printed or typed)

7522 sw 9 st.
Address

North Lauderdale FL. 33068
City, State & Zip

954) 479-2866
Daytime Telephone number

NacelynMartinez@yahoo.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: RESTAURANTE LAS COLINAS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

7130 Kimberly Blv.
North Lauderdale
Fl. 33068

Mailing address, if different is:

7522 SW 9 St.
North Lauderdale
Fl. 33068

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

So that everything is protected by
the Law.

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marti Sauer (owner)

Address

7522 SW 9 St
North Lauderdale

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

STANDARD
NOTARIAL
19 DEC -4 PM 1:08

(cont.)

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: NACELYN MARTINEZ

Address: 7522 SW 9 ST.

NORTH LAUDERDALE, FL 33068

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Martín D. Saucedo

Address: 7522 SW 9 ST.

North Lauderdale FL 33068

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

x Nacelyn Martinez
Required Signature/Registered Agent

12/3/2013
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.

* [Signature]
Required Signature/Incorporator

12/3/2013
Date