

(Re	questor's Name)	<del> </del>		
(Ad	dress)			
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			



700261381837

06/23/14--01050--011 \*\*70.00

14 JUN 23 PH 3:

SLEELTAST LITTLE STREET

## **COVER LETTER**

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

Tallahassee, FL 323	314		
SUBJECT: ROI	NDO'S HOLDIN		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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 CO	PY REQUIRED
FROM:	ARY GIBERSO	N c (Printed or typed)	
P	O BOX 3746	<b>(</b> (***********************************	
	<u> </u>	Address	
0	CALA, FL 3447 <mark>8</mark>		
<del></del>	City	, State & Zip	in the flow to did

352.304.3400

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

Daytime Telephone number

MOJOGRILLCPA@AOL.COM

E-mail address: (to be used for future annual report notification)

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

<u>ARTICLE II F</u>	PRINCIPAL OFFICE	3.6 T 11 1	an diagn
Principal street address 506 S. PINE AVENUE OCALA, FL 34471		Mailing address, if different is: PO BOX 3746 OCALA, FL 34478	
			23
			P
ARTICLE IV S The number of shares	HARES 1000		25 25
ARTICLE V I	NITIAL OFFICERS AND/OR DIRECT Politie: PO Box 3746	ORS Name and Title:Address:	25 S
ARTTCLE V I	<u>NITIAL OFFICERS AND/OR DIRECT</u> <sub>Title:</sub> Ronald Fernandez, P	Name and Title:	25 S
ARTICLE V I Name and 'I Address	NITIAL OFFICERS AND/OR DIRECT Ponald Fernandez, P PO Box 3746 Ocala, FL 34478	Name and Title:Address:	25
ARTICLE V I Name and 'I Address	PO Box 3746  Greg Mascaro, S  PO Box 3746	Name and Title:	25
Name and 'I  Name and 'I	PO Box 3746  Greg Mascaro, S  PO Box 3746	Name and Title:	25
Name and 'I'  Name and 'I'  Address	PO Box 3746  Greg Mascaro, S  PO Box 3746	Name and Title:	25
Name and 'I'  Name and 'I'  Address	PO Box 3746  Ocala, FL 34478  PO Box 3746  Ocala, FL 34478  PO Box 3746  Ocala, FL 34478  PO Box 3746  Ocala, FL 34478	Name and Title:  Address:  Name and Title:  Address:	25

Name :	and Title: N	ame and Title:
Addre	ess A	ddress:
<u>ARTICLE VI</u>	REGISTERED AGENT	(C)
The <u>name and</u>	Florida street address (P.O. Box NOT acceptable) of the	registered agent is:
Name:	Ronald Fernandez	AN SECTION OF SECTION
Address:	506 S. PINE AVENUE	registered agent is:
	OCALA, FL 34478	
ARTICLE VI	I INCORPORATOR	3: 25
The <u>name and</u>	address of the incorporator is:	
Name:	GARY GIBERSON	
Address:	506 S. PINE AVENUE	
	OCALA, FL 34478	
	amed as regist <u>ered age</u> nt to accept service of process for I am familiar with and accept the appointment as registe	
		June 18, 2014
	Required Signature/Registered Agent	Date .
	ocument and affirm that the facts stated herein are true to Department of stitles of estitutes a third degree felony as	
		June 18, 2014
	Received Signature/Incorporator	Date

.