

P14000056213

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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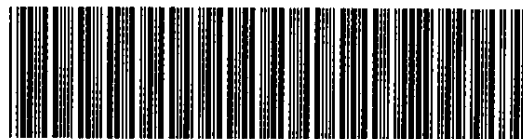
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUN 27 PM 4:21

APPROVED
AND
FILED

1/H

COVER LETTER

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

SUBJECT: Camino Vending, 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: Leonardo Lazo

Name (Printed or typed)

7597 Fairway Trail

Address

Boca Raton, FL 33487

City, State & Zip

561-866-9295

Daytime Telephone number

leorlazo@icloud.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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: Camino Vending, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

7597 Fairway Trail

Boca Raton, FL 33487

Mailing address, if different is: SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Vending Machines

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Leonardo Lazo, President

Name and Title: _____

Address

7597 Fairway Trail

Address: _____

Boca Raton FL 33487

Name and Title: Mario Martinez, Treasurer

Name and Title: _____

Address

6230 Stanley Lane

Address: _____

Delray Beach, FL 33484

Name and Title: _____

Name and Title: _____

Address

Address: _____

APPROVED
AND
FILED (cont)

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Name and Title: _____ Name and Title: _____
Address _____ Address: SECRETARY OF STATE

_____ TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Leonardo Lazo
Address: 7597 Fairway Trail
Boca Raton, FL 33487

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Leonardo Lazo
Address: 7597 Fairway Trail
Boca Raton, FL 33487

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

Jun 24, 2014
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.

Required Signature/Incorporator

Jun 24, 2014
Date