

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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****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
EL CAFE INC.**

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

MD 12/11

FILED

14 DEC 10 AM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

14 DEC 10 PM 3:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

El Cafe INC. *EFFECTIVE DATE*1-1-15**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

2827 NW 10 th Ave #BMiami, FL 33127**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESSRECEIVED
AT MASSACHUSETTS
DEC 10 AM 10:31

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ARTICLE IV SHARES

The number of shares of stock is:

five hundred (500)**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:

Luis Rosso (p)

Name and Title:

Address

2827 NW 10th Ave#B

Address:

Miami FL 33127

Name and Title:

Sergio Guerrero(vp)

Name and Title:

Address

450 NW 128 st

Address:

Miami FL 33168

Name and Title:

Name and Title:

Address

Address:

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(conf.)

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

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

Name: Luis Rosso
Address: 2827 NW 10 th Ave #-B
Miami FL 33127

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Luis Rosso
Address: 2827 NW 10th Ave#_B
Miami FL 33127

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

Luis Rosso

Required Signature/Registered Agent

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.

Luis Rosso

Required Signature/Incorporator

Date

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