

P15000042723

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000112391 3)))



H150001123913AB0X

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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
CAFE 6303, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

94034

Please file
this on the
day that was
fax 5/7/15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAY - 7 AM 10:56

APPROVED
AND
FILED

Electronic Filing Menu

Corporate Filing Menu

Help

no-fax
5/11/15
5/12/15

COVER LETTER

17180000112391

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

SUBJECT: Cafe 6303, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: ALFRED DIAZ
Name (Printed or typed)
6303 BIVE LAGOON DRIVE
Address
MIAMI, FL 33016
City, State & Zip
305-528-3130
Daytime Telephone number
ALDaviSupplies@aol.com
E-mail address: (to be used for future annual report notification)

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



May 12, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: CAPE 6303
REF: W15000033493

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If you have any further questions concerning your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

FAX Aud. #: E15000112391
Letter Number: 615A00009906

RECEIVED
15 MAY 12 PM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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:

CAFE 6303, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

ALFRED Diaz

6303 BLUE LAGOON Drive

Miami, FL 33126

Mailing address, if different is:

16262 N.W 85th

Miami, FL 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRANSACTION ANY UNLAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

ALFRED Diaz

Name and Title:

PRESIDENT

Address

16262 N.W 85th

Address:

Miami, FL 33016

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAY 17 AM 10:56

APPROVE
AND
FILED

APPROVAL
AND
FILED (cont.)

15 MAY -7 AM 10:56

Name and Title: _____	Name and Title: _____
Address _____	Address: <u>SECRETARY OF STATE</u>
_____	<u>TALLAHASSEE, FLORIDA</u>
_____	_____

ARTICLE VI REGISTERED AGENT

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

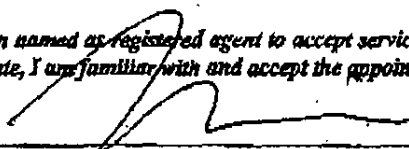
Name: ALFRED Diaz
Address: 16262 N.W. 85th
MIAMI, FL 33016

ARTICLE VII INCORPORATOR

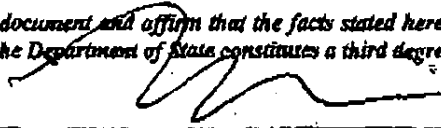
The name and address of the Incorporator is:

Name: ALFRED Diaz
Address: 16262 N.W. 85th
MIAMI, FL 33016

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	<u>5-7-15</u> _____ 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	<u>5-7-15</u> _____ Date
---	--------------------------------

H15000112391

05/12/2015 15:01 3056339696