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Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
SABOR NICA INC.**

Certificate of Status	0
Certified Copy	1
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15 JUL 24 AM 8:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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15 JUL 24 PM 3:55

ARTICLE OF INCORPORATION

OF

SABOR NICA INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: SABOR NICA INC.

The principal place of business of this corporation shall be:

610 W. 29 ST.
HIALEAH, FL. 33012

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value is that this corporation is authorized to have outstanding at any one time is: 100 x \$ 10.00 = \$ 1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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TALLAHASSEE, FLORIDA

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

MARIA D. ROA

DIRECTOR

6875 W. 29 WAY
HIALEAH, FL. 33018

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

MARIA D. ROA

PRESIDENT (100 shares)

6875 W. 29 WAY
HIALEAH, FL. 33018

The undersigned has (have) executed these Article of Incorporation this 24 th. day of July, 2015.

⁶
+ MARIA D ROA

Signature/Title

Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: _____
SABOR NICA INC.

2. The name and address of the registered agent and office
is _____
MARIA D. ROA
(Name)

6875 W. 29 WAY

(P. O. BOX NOT ACCEPTABLE)

WIALEAH, FL. 33018

(CITY/STATE/ZIP)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE 07-24-2015