

PK 000026327

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
CEVICHE ON THE RUN, INC

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, P.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

CEVICHE ON THE RUN, INC

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

4841 SW 6TH STREET

CORAL GABLES, FL 33134

Mailing address, if different is:

4841 SW 6TH STREET

CORAL GABLES, FL 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARCO ANTONIO CORNEJO

Name and Title:

Address: PRESIDENT

Address:

4841 SW 6TH STREET

CORAL GABLES, FL 33134

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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

ARTICLE VI REGISTERED AGENT

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

Name: MARCO ANTONIO CORNEJO
Address: 4841 SW 6TH STREET
CORAL GABLES, FL 33134

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ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: MARCO ANTONIO CORNEJO
Address: 4841 SW 6TH STREET
CORAL GABLES, FL 33134

ARTICLE VIII EFFECTIVE DATE: 03/23/2016

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Y _____ 03/23/2016
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.817.155, F.S.

X _____ 03/23/2016
Required Signature/Incorporator Date

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