

Florida Department of State
Division of Corporations
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To:

Division of Corporations
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Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
SALSA BUENA FOODS, CORP.**

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

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SEP 23 2016

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME Salsa Buena Foods, Corp.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address Mailing address, if different is:
4700 NW 7St _____
Suite # 11 _____
Miami, FL 33126 _____

ARTICLE III PURPOSE Any and All Lawful Business
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 1000 shares
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Yrana A Vasquez President	Name and Title:	_____
Address	4632 NW 114 Ave	Address:	_____
	# 807		_____
	Doral, FL 33178		_____

Name and Title:	Eugenio A Vasquez Vice President	Name and Title:	_____
Address	4650 NW 107 Ave	Address:	_____
	# 1802		_____
	Doral, FL 33178		_____

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: Yrana A Vasquez
Address: 4632 NW 114 AVE. # 807
Doral, FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Yrana A Vasquez
Address: 4632 NW 114 AVE # 807
Doral, FL 33178

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 09/13/2016 (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. Vasquez 09/13/2016
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.

Y. Vasquez 09/13/2016
Required Signature/Incorporator Date

sean@ccomh