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COVER LETTER

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

SUBJECT: LA PERRADA DEL GOOL Mr. LOPEZ, 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: LA PERRADA DEL GOOL Mr. LOPEZ, INC.  
Name (Printed or typed)

7715 NW 22 AVE. UNIT 113  
Address

MIAMI, FLORIDA 33147  
City, State & Zip

(305) 910-5240  
Daytime Telephone number

castillorebelde21@gmail.com  
E-mail address: (to be used for future annual report notification)

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

**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: LA PERRADA DEL GOOL Mr. LOPEZ, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

7715 NW 22 AVE. UNIT 113  
MIAMI, FL. 33147

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: This corporation is organized for  
the purpose of Transacting any lawful business.

**ARTICLE IV SHARES**

The number of shares of stock is: 100 shares of One Dollar (\$1.00) per Value common stock

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: DIRECTOR / ANA J VILCHEZ Name and Title: \_\_\_\_\_

Address: 7715 NW 22 AVE UNIT Address: \_\_\_\_\_

113, MIAMI, FL.  
33147

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: ANA J VILCHEZ  
Address: 7715 NW 22 AVE UNIT 113  
MIAMI FL. 33147

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**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: ANA J VILCHEZ  
Address: 7715 NW 22 AVE UNIT 113  
MIAMI FL. 33147

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 10-26-2016 (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.

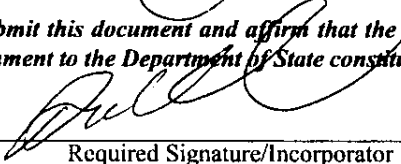
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



\_\_\_\_\_  
Required Signature/Registered Agent

10-26-2016  
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

10-26-2016  
Date