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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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
N.R. DOMINICAN FOOD SERVICE CORP.

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

RECEIVED

17 OCT 26 PM 2:47

BUREAU OF COMMERCIAL
INFORMATION SERVICES

17 OCT 26 AM 9:16

Electronic Filing Menu

Corporate Filing Menu

Help

H17000282621

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

N.R. DOMINICAN FOOD SERVICE CORP.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

111 NW 42 ST

MIAMI FL. 33127

ARTICLE III SHARES: The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

NELITA RUIZ

PRESIDENT

111 NW 42 ST

MIAMI FL. 33127

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

NELITA RUIZ

111 NW 42 ST

MIAMI FL 33127

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

NELITA RUIZ

111 NW 42 ST

MIAMI FL 33127

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H17000282621

Required Signatures:

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

 10-22-17
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 § 817.155, F.S.

 10-22-17
Incorporator Date

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