

PIB-0000049896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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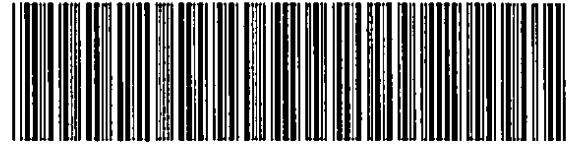
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 04 2018

T SCHROEDER

COVER LETTER

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

SUBJECT: El Verde B.B.Q., 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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Ángel A. Torres-Sánchez
Name (Printed or typed)
PO Box 2253
Address
Río Grande, Puerto Rico, 00745
City, State & Zip
787.564.1013
Daytime Telephone number
torresangel1983@yahoo.com
E-mail address: (to be used for future annual report notification)

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

El Verde B.B.Q., Inc.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

Carr. 3 Intersección 186, KM 26, Esq. Entrada El Verde

PO Box 2253

Río Grande, Puerto Rico 00745

Río Grande, Puerto Rico, 00745

ARTICLE III PURPOSE

Any and all lawful business.
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ángel A. Torres-Sánchez **P**

Name and Title: _____

Address Carr. 3 Intersección 186, KM 26

Address: _____

Esquina Entrada el Verde

Río Grande, Puerto Rico 00745

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Carlo Defendini-Díaz
Address: 14025 Fairway Island Dr., Apt. 327
Orlando, Florida 32837

ARTICLE VII INCORPORATOR

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

Name: Ángel A. Torres-Sánchez
Address: Carr. 3 Int. 186, KM 26, Entrada El Verde
Río Grande, Puerto Rico 00745

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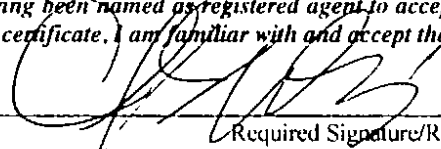
ARTICLE VIII EFFECTIVE DATE: 1/15/2018

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 days prior or 90 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

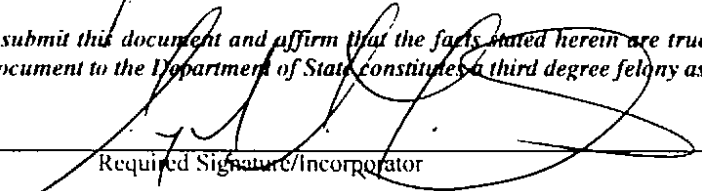


Required Signature/Registered Agent

01/16/18

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

01/16/18

Date