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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : FASTKIT CORP
Account Number : 120100000009
Phone : (305) 599-0839
Fax Number : (305) 592-3591

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
ZUJINOS FOOD & SERVICES CORP.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

RECEIVED

2018 JUL 18 PM 3:17

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

18 JUL 18 PM 4:30

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Corporate Filing Menu

Help

N. SAMS

JUL 19 2018

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: ZUJINOS FOOD & SERVICES CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4834 NW 114 CT.

4834 NW 114 CT.

DORAL, FL. 33178

DORAL, FL. 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: IMPORT/EXPORT FOOD PRODUCTS AND SERVICES

ARTICLE IV SHARES

1,000 SHARES AT \$1.00 PAR VALUE
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MILDRED G. GONZALEZ PENSO, PR.

Name and Title: _____

Address 4834 NW 114 CT.

Address: _____

DORAL, FL. 33178

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: CABANAS & ASSOCIATES, P.A.
Address: 8350 NW 52ND TERRACE - STE. 208
DORAL, FL. 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOSEPH F. CABANAS
Address: 8350 NW 52ND TERRACE - STE. 208
DORAL, FL. 33166

ARTICLE VIII EFFECTIVE DATE

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

7-18-18

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

JULY 18, 2018

Date

18 JUL 18 PM 4:30
DEPARTMENT OF STATE, FLORIDA