

P18000068238

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000231458 3)))



H180002314583ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 120000000019
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
BEBOPSDINER CORP.

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

Electronic Filing Menu

Corporate Filing Menu

Help

2018 AUG -8 PM 4:17

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
ELECTRONIC FILING SERVICES

2018 AUG -8 AM 8:42
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
ELECTRONIC FILING SERVICES

ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)**ARTICLE I NAME:** The name of the corporation is:bebopsdiner corp.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

665 E 8th Ln Hialeah FL 33010**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Oscar Becerra Santana (P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

OSCAR Becerra Santana
665 E 8th Ln
Hialeah FL 33010**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Oscar Becerra Santana
665 E 8th Ln
Hialeah FL 33010

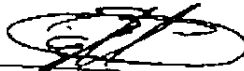
H1800023.1458

18 AUG -8 AM 8:42

DIVISION OF STATE
CORPORATION

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



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.



Incorporator

Date

18 AUG -8 AM 8:42
SECRETARY OF STATE
DIVISION OF CORPORATION
TALLAHASSEE, FLORIDA

H18000231458