

P19000012163

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

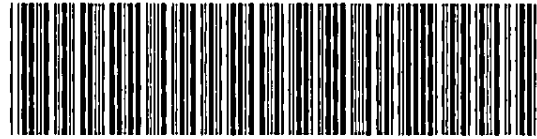
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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19 FEB -4 PM 7:51  
FEB 13 2019  
FEB 13 2019

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FEB 13 2019

## COVER LETTER

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

SUBJECT: HOT ENTERPRISES CORP.

(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: SUSANA M. PIEDRA

Name (Printed or typed)

7715 WEST 29TH WAY #101

Address

HALEAH, FL 33018

City, State & Zip

305.301.8020

Daytime Telephone number

ELPIQUERICAN@GMAIL.COM

E-mail address: (to be used for future annual report notification)

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

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 17, 2019

SUSANA M. PIEDRA  
7715 WEST 29TH WAY #101  
HIALEAH, FL 33018 US

SUBJECT: HOT ENTERPRISES CORP  
Ref. Number: W19000006249

2019 FEB -4 AM 11  
RECEIVED

We have received your document for HOT ENTERPRISES CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ingrid D Kelly  
Regulatory Specialist II

Letter Number: 119A00001374

I, SUSANA PIEDRA am the owner of  
HOT ENTERPRISES CORP, with the document  
number of W19000006249. I have no intentions on  
reinstating the entity as a Corporation LLC (please circle one).  
Please push through with the new filing as  
W19000006249, with the tracking number of  
\_\_\_\_\_

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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: HOT ENTERPRISES CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7715 WEST 29TH WAY APT. 101  
MIAMI FL 33018

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: S CORP

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SUSANA PIEDRA / V.P.

Address: 7715 WEST 29TH WAY #101  
MIAMI, FL 33018

Name and Title: ALBERTO PEDREIRA / Pres

Address: 1770 NE 191ST APT. 804  
MIAMI FL 33179

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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NOTARIAL PUBLIC  
CORIDA

Name and Title: Alberto Piedra <sup>P.O.</sup> [REDACTED]  
Address: 1770 NE 191 ST. APT 804  
MIAMI, FL 33179

Name and Title: Susana Piedra <sup>V.P.</sup> [REDACTED]  
Address: 7715 W 25th WAY  
APT. 101  
HiALeah, FL 33018

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Alberto Piedra  
Address: 1770 NE 191 ST. APT. 804  
MIAMI, FL 33179

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CLERK OF COURT  
STATE OF FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Susana Piedra  
Address: 7715 W 25th WAY APT. 101  
HiALeah, FL 33018

**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

[Signature]  
Required Signature/Registered Agent

2/7/19  
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.

[Signature]  
Required Signature/Incorporator

1/8/19  
Date