## PP00094675

| (Re                                     | equestor's Name)   |          |
|---|--------------------|----------|
| (Ac                                     | ldress)            | <u> </u> |
| (Ac                                     | idress)            |          |
| (Cit                                    | ty/State/Zip/Phone | e #)     |
| PICK-UP                                 | ☐ WAIT             | MAIL     |
| (Bu                                     | isiness Entity Nan | ne)      |
| (Do                                     | ocument Number)    |          |
| Certified Copies Certificates of Status |                    |          |
| Special Instructions to                 | Filing Officer:    |          |
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## **COVER LETTER**

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

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$78.75 Filing Fee & Certified Copy □ \$70.00 □ \$78.75 □ \$87.50 Filing Fee Filing Fee Filing Fee, & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED 990 E 25H Street HislaH Fl Address Henr OreFoelll. 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 The name of the corpora | tion shall be: <u>CAFE 17/21 THE</u>                                    | E FOOD NETWOR                            | K INC   |                     |
|--|---|--|---|---------------------|
| ARTICLE II PRINC<br>990 E 2514 3tm     | CIPAL OFFICE Principal street address Ret HIALEAH FL 33013              | <u>9% E</u><br>———                       | Mailing address, it different is: 3514 34 Feet HIALEAH FO       | <u>. 32ci</u> š<br> |
|  | DSE  the corporation is organized is: RES  ALL LAWFUL BUSISWE           |  | STATE OF FLORING  |                     |
|  |   |  |   |                     |
|  |   | <del>-</del>                             |   | , cars              |
|  | 990 E 25 H Street HINEA.<br>35013                                       |  |   | HALEAH              |
| Name and Title Address                 | HENRY Collins Sec.<br>990 E. 35 M Street HIL<br>FL 33013                | ALEA]/ Address:                          | :: MATIA A. Mercado<br>190 E 25 <sup>M</sup> Street<br>FL 33013 | HIALEAH             |
| Name and Title<br>Address              | : Alatheniel Johnson 1:<br>990 E 25 <sup>H</sup> Hreet Hist<br>FL 33013 | PIK.  .( S Name and Title  eg)  Address: | 190 E 25" Street  FL 33013                                      |                     |
|  |   |  |   |                     |

|  | ·  | Name and Title:   |   |
|--|--|---|---|
| Address  |  | Address:  |   |
|  |  | <del></del>   |   |
|  |  |   |   |
| ARTICLE VI REGISTERED The name and Florida street add  |  | table) of the registered agent is                               | s:  |
| Name: Heary (  | Jollins .  |   |   |
| Address: <u>990 E</u>  | 250H Street 4/6  | aleaH_  |   |
| FL 334   | <u></u>  |   |   |
| ARTICLE VII INCORPORAT   | <u>OR</u>  |   |   |
| The <u>name and address</u> of the Inco  | orporator is:  | , <i>i</i>  | .0.1.1  |
| Name: (25e t   | UZI THE FOOD NO  | ETWER INC. " HEN  | VKY Collins   |
| Address: <u>990 E</u>  | 25th Street 25-13  |   |   |
| Effective date, if other than the d (If an effective date is listed, the filing.)  | e date must be specific and                              | d cannot be more than five                                      | days prior or 90 days after the   |
| Note: If the date inserted in this   |  |   | rements, this date will not be liste  |
| the document's effective date on   |  |   |   |
| the document's effective date on  Having been named as registered  |  |   |   |
| the document's effective date on   |  |   |   |
| Having been named as registered certificate, Vancfamiliar with and   |  | registered agent and agree to                                   |   |
| Having been named as registered certificate, Van familiar with and Requir  | red Signature/Registered Agren that the facts stated her | registered agent and agree to ent rein are true. I am aware tha | act in this capacity  12/27/3/3  Date  to the false information submitted   |
| Having been named as registered certificate, Vancfamiliar with and   | red Signature/Registered Agren that the facts stated her | registered agent and agree to ent rein are true. I am aware tha | act in this capacity  12/27/3/3  Date  to the false information submitted   |
| Having been named as registered certificate, Van familiar with and Requir  | red Signature/Registered Agren that the facts stated her | registered agent and agree to ent rein are true. I am aware tha | act in this capacity  12/27/3/3  Date  to the false information submitted   |
| Having been named as registered certificate, Vam familiar with and Requir  I submit this document and affir document to the Department of S. | red Signature/Registered Agren that the facts stated her | registered agent and agree to ent rein are true. I am aware tha | Date in this capacity  12/21/30/3  Date  at the false information submitted 817.155, F.S.   |
| Having been named as registered certificate, Vam familiar with and Requir  I submit this document and affir document to the Department of S. | red Signature/Registered Agren that the facts stated her | registered agent and agree to ent rein are true. I am aware tha | Date in this capacity  12/21/30/3  Date  at the false information submitted 817.155, F.S.   |
| Having been named as registered certificate, Vam familiar with and Requir  I submit this document and affir document to the Department of S  | red Signature/Registered Agren that the facts stated her | registered agent and agree to ent rein are true. I am aware tha | Date Date  Date    12/21/30/9     Date    13/31/30/9     Date    13/31/30/9     Date   Date   Date     Date   Date   Date     Date   Date   Date   Date   Date     Date |

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