

P20000009117
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H20000038213 3)))



H200000382133ABCT

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 : I2000000019
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
NC CUBAN BUFFET CORPORATION

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

FEB 04 2020

T. SCOTT

future: **

2020 FEB -3 PM 2:08

RECEIVED

2020 FEB -3 PM 3:50

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:NC CUBAN BUFFET CORPORATION**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

9101 SW 34 ST
Miami, FL 33165**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**ERENDIRA VALENTINA DELGADO
PRESIDENT**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

ERENDIRA VALENTINA DELGADO
9101 SW 34 ST Miami, FL 33165**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:ERENDIRA VALENTINA DELGADO
9101 SW 34 ST
MIAMI FL 33165

2020 FEB -3 PM 2:00

11.50

Required Signatures:

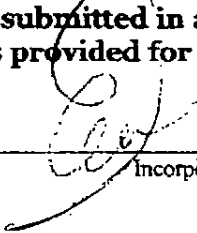
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Registered Agent02/03/20

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.



Incorporator02/03/20

Date