9/14/2020

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To:

Division of Corporations

Fax Number

Account Name

: (850)617-6381

12:13 Military Milita . . .

Account Number : I20190000086 Phone : (305)275-1300

Fax Number : (888)653-6564

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

: ULLOA & COMPANY PROFESSIONAL ASSOCIATION

Email Address: info@ulloacompany.com

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https://efile.sunbiz.org/scripts/efilcovr.exe

FLORIDA PROFIT/NON PROFIT CORPORATION

Adelita's Fresh Green Market Corp

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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TALLAHASSEE, FLORIDA

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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: Adelita's Fresh Green Market Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address is: 17011 SW 213 LANE, MIAMI, FL 33187

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Laura L Ramirez, President

Address: 18533 SW 359 Street, HOMESTEAD, FL 33034

Name and Title: Mery Villareyna Lara, (VP)

Address: 17011 SW 213 LANE, MIAMI, FL 33187

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ARTICLE VI REGISTERED AGENT

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

Ulloa and Company Professional Association

14050 SW 84 Street, Suite 104, Miami, FL 33183

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is

Ulloa and Company Professional Association

14050 SW 84 Street, Suite 104, Miami, FL 33183

ARTICLE VIII EFFECTIVE DATE

Effective date, if other than the date of filing:

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

09/14/2020

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

09/14/2020