Division of Corporations



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Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : CLARA GIRALDO ENFOLLED AGENT

Account Number: 119990000017 Thone: (305)485-9300 Fax Number: (305)485-1098

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Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION COLOMBIAN FOOD, INC.

Certificate of Status	0
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November 3, 2020

#### FLORIDA DEPARTMENT OF STATE Division of Corporations

CLARA GIRALDO ENROLLED AGENT

SUBJECT: COLOMBIAN FOOD, INC.

REF: W20000126690

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A post office box is not an acceptable address for the registered agent.

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Lillie S Kervin FAX Aud. #: H20000379771
Regulatory Specialist II Letter Number: 420A00021926

# ARTICLES OF INCORPORATION

#### OF.

# COLOMBIAN FOOD, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporate, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

### ARTICLE I

The name of this corporation shall be:

# COLOMBIAN FOOD, INC.

#### ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

# ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

(1) Said corporation shall further have powers: To have perpetual succession by it's corporate

### COLOMBIAN FOOD, INC.

## **ARTICLE IV**

The aggregate number of shares, which the corporation shall have authority to issue, is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation

#### **ARTICLE V**

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

WILLIAM ORDONEZ
1514 SE 26<sup>TH</sup> TERRACE
HOMESTEAD 33035

The principal office shall be:

11869 SW 248<sup>TH</sup> TERRACE HOMESTEAD, FL 33032

#### **ARTICLE VI**

The initial Board of Directors shall consist of a total of TWO (02) persons, and the name and address of the person who is to serve as initial director:

WILLIAM ORDONEZ 1514 SE 26<sup>TH</sup> TERRACE HOMESTEAD 33035 **PRESIDENT** 

FREDDY URIEL GIRALDO 11869 SW 248<sup>TH</sup> TERRACE HOMESTEAD, FL 33032 **VICEPRESIDENT** 

The name and address of the incorporator executing these Articles of Incorporation is

WILLIAM ORDONEZ 1514 SE 26<sup>TH</sup> TERRACE HOMESTEAD 33035

IN WITNESS WHERE OF, the undersigned incorporator has (ve) executed these Articles of Incorporation this NOVEMBER 02, 2020.

WILLIAM ORDONEZ

**ARTICLE VII** 

THIS CORPORATION WILL START OPERATING ON JANUAR / 15T, 2021

# CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, Submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the corporation is:

# COLOMBIAN FOOD, INC.

2. The Name and Address of the registered agent and office is:

WILLIAM ORDONEZ 1514 SE 26TH TERRACE HOMESTEAD 33035

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES. AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE WILLIAM DECOVER

Date: NOVEMBER 02 2020