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	Fax Number	: (850)617-6381	<i>(</i> 7)
From:			ో <u>డా</u>
	Account Name	: PADRON AND ASSOCIATES INC.	رمي -
	Account Number	: I2006 00 00156	⊇≂
	Phone	: (305)818-0404	22
	Fax Number	: (305)818-0898	

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FLORIDA PROFIT/NON PROFIT CORPORATION GARCIA'S PAELLA CATERING CORP.

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Certificate of Status	0
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COVER LETTER

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

SUBJECT:	A'S PAELLA CATERING CORP.		
300JEC1	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	l a check for:
S70.00 Filing Fee		☐ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRES	
FROM:	ALPH PADRON Nam P5 W 76TH ST - SUITE 102	e (Printed or typed)	
		Address	
нь	ALEAH, F1, 33016		
_	City	, State & Zip	
305	5-818-040-1		
	Daytime 1	Telephone number	
ralp	oh@ralphpadron.com		
	E-mail address: (to be use	d for future annual report	notification)

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

p.3

ARTICLES OF INCORPORATION

PADRON AND ASSOCIATES INC

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporat	ion shall be: GARCIA'S PAELI	LA CATERING CORP.	
ARTICLE II PRINC 2095 W 76TH ST SUITE 163	IPAL OFFICE Principal street address		Mailing address. if different is:
HIALEAH, FL 33016			
ARTICLE III PURPO The purpose for which the	OSE the corporation is organized is:	ANY AND ALL LAWFUL B	USINESS
			2021
			AR 10
ARTICLE IV SHARI The number of shares of		CTOPS	F 5 174 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name and Title	GARCIA HASLEY - PTD	Name and Title	CORRO, ISAURA A VPSD
Address	2095 W 76TH ST	Address:	2095 W 76TH ST
	SUITE 163		SUITE 163
	HIALEAH, FL 33016		HIALEAH, FL 33016
Name and Title:		Name and Title	: <u></u>
Address		Address:	
Name and Title:		Name and Title	· <u></u>
Address		Address:	

Name a	and Title:	Name and Title:	
Addre	ss	Address:	
			
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT accepta	bla) afthe conjectured arms in	
the manie and	PADRON & ASSOCIATES, INC.	one) or the registered agent is:	
Name:			
Address:	2095 W 76TH ST - STE 102		
	HIALEAH, FL 33016		
ARTICLE VII	<u>INCORPORATOR</u>		
The name and a	address of the Incorporator is:		
Name:	HASLEY GARCIA		
Address:	2095 W 76TH ST		
	HIALEAH, FL 33016		
Effective date, i	date is listed, the date must be specific and	. (OPTION	AL) liness days prior or 90 business
Note: If the dat the document's	te inserted in this block does not meet the appli- effective date on the Department of State's rec	cable statutory filing requirem ords.	ents, this date will not be listed as
Having been na this certificate, t	imed as registered agent to accept service of p I am familiar svith and accept the appointment	rocess for the above stated cor as registered agent and agree	poration at the place designated in to act in this capacity
			03/09/2021
	Required Signature/Registered Ager	ıl	Date
I submit this do document to the	ocument and affirm that the facts stated herei Department of State constitutes a third degree	n are true. I am aware that the felony as provided for in s.81	ne false information submitted in a 7.155, F.S.
,	Hall IIn		03/09/2021
Reul	pived Signature Incorporator		Date