

P 210000-80939

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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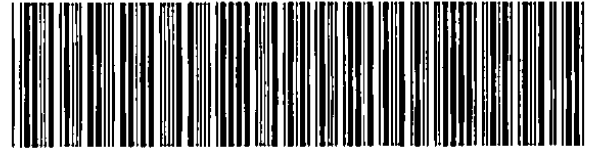
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 SEP 14 PM 3:20

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(707)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 31, 2021

ANGEL F OLIVEROS
4740 NW 84TH COURT #16
DORAL, FL 33166

SUBJECT: MAMORS FOOD COMPANY INC
Ref. Number: W21000089370

We have received your document for MAMORS FOOD COMPANY INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize:

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tammi Cline
Regulatory Specialist II Supervisor

Letter Number: 121A00020988

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

2021 SEP 14 PM 3:20

2021 SEP 14 PM 12:37

COVER LETTER

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

SUBJECT: Flamers Food Company Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Angel T. Oliveros
Name (Printed or typed)

4740 NW 84th court #116
Address

Doral, FL 33166
City, State & Zip

786-422-5015
Daytime Telephone number

Scarlett@vault1040.com
E-mail address: (to be used for future annual report notification)

2021 SEP 14 PM 3:20

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 corporation shall be: Mammas Food Company Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address
4740 NW 84th court # 16

Doral, Fl 33166

Mailing address, if different is:
4740 NW 84th court # 16

Doral, Fl 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

any and all Lawfull Business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Angel F. Oliveros P

Address: 4740 NW 84th court
16
Doral, Fl 33166

Name and Title: Jose A. Oliveros U

Address: 4740 NW 84th court
16
Doral, Fl 33166

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Vault Tax Service Corp

Address: 1414 NW 107 ave suite 100
Miami, FL 33172

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Scarlett Alvarez

Address: 1414 NW 107 ave suite 100
Miami, FL 33172

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed on the document's effective date on the Department of State's records.

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

Scarlett Alvarez
Required Signature/Registered Agent

04/08/2021
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

[Signature]
Required Signature/Incorporator

04/08/2021
Date