

P21 000 103152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

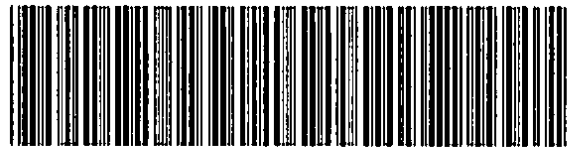
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200377460942

12/05/21--01018--021 \*\*70.00

2021 DEC -6 AM 8:45

LED

*[Handwritten signature]*

December 3, 2021

New Filing Section  
Department of the State  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

RE: Filing for New Profit Corporation

Department of Corporations:

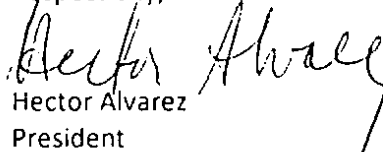
We are enclosing the application for a new for profit corporation , Paletas Mexicanas, Inc., effective January 1<sup>st</sup>, 2022.

**On November 23, 2022 we filed the application for this corporation, Paletas Mexicanas, Inc., and by error we filed as a non-profit. The Document number is N21000013522. We filed the dissolution of this corporation on line today.**

At this time, we are requesting that we can use the same name Paletas Mexicanas, Inc. for the corporation we are applying today. It was our mistake to file for a non profit when our intention is to open a profit corporation. The effective date is January 1<sup>st</sup>, 2022.

We appreciate your cooperation with this matter. Thank you.

Respectfully,

  
Hector Alvarez  
President

Cerified Mail Number 7018 0360 0001 1892 4738  
Return Receipt Requested

2021 DEC 3 AM 8:45

RECEIVED

## COVER LETTER

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

SUBJECT: PALETAS MEXICANAS, 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  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: NORMA I RAMIREZ  
Name (Printed or typed)

3681 TRIPOLI BLVD  
Address

Punta Gorda, FL 33950  
City, State & Zip

941-875-1644  
Daytime Telephone number

mramirez-cpa@hotmail.com  
E-mail address: (to be used for future annual report notification)

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: PALETAS MEXICANAS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

38363 COUNTY ROAD 54

ZEPHYRHILLS, FL 33542

Mailing address, if different is:

38361 County Road 54  
Zephyrhills, FL 33542

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To sell ice cream and  
fruit desserts to the public for  
consumption within the business  
facility or carry-out.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Hector Alvarez, Pres Name and Title: \_\_\_\_\_

Address: 36829 Frazee Hill Rd Address: \_\_\_\_\_  
Dade City, FL 33523

Name and Title: Juan Moreno, VP Name and Title: \_\_\_\_\_

Address: 8135 23rd Street Address: \_\_\_\_\_  
Zephyrhills, FL 33540

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ 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: Hector Alvarez  
Address: 36829 Frazee Hill Rd  
Dade City, FL 33523

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Hector Alvarez  
Address: 36829 Frazee Hill Rd  
Dade City, FL 33523

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: JANUARY 1<sup>st</sup> 2022 (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.)

FILED  
2021 DEC -6 AM 8:45

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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 this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity:*

Hector Alvarez  
Required Signature/Registered Agent

12/03/2021  
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.*

Hector Alvarez  
Required Signature/Incorporator

12/03/2021  
Date