

P22000023489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

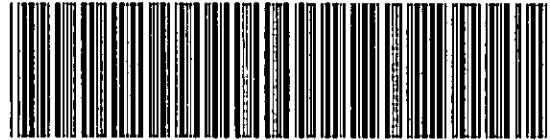
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500382669745

03/09/22--01015--007 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 MAR -9 AM 8:44

FILED

D. O'KEEFE

MAR 30 2022

✓

COVER LETTER

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

SUBJECT: Las Delicias de Maria, 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: Deisy M. Cruz
Name (Printed or typed)

931 Lyons Rd. 4207
Address

Coconut Creek FL 33063
City, State & Zip

(754) 304-1824
Daytime Telephone number

deimarct@gmail.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: Las Delicias de Maria, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
151 NE 59th. Ct
Oakland Park, FL 33334

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: MGR Maria E. Portillo Name and Title: _____

Address 151 NE 59th. Ct Address: _____
Oakland Park, FL 33334

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
2022 MAR -9 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Maria E. Portillo

Address: 151 NE 59th Ct
Oakland Park, FL 33334

ARTICLE VII INCORPORATOR

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

Name: Maria E. Portillo

Address: 151 NE 59th Ct
Oakland Park, FL 33334


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.)

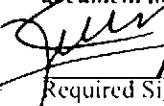
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

 Maria E. Portillo
Required Signature/Registered Agent

03/01/22
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.

 Maria E. Portillo
Required Signature/Incorporator

03/01/22
Date

2022 MAR -9 AM 8:45
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED