

10/18/22, 5:47 PM

**P22000079851**Florida Department of State  
Division of Corporations  
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Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**PANDEBONO BAKERY INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2022 OCT 19 AM 8:05

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## **AFFIDAVIT**

BEFORE ME, the undersigned authority, on this day personally appeared **AMPARO CADAVID**, who after being firstly duly sworn, under oath, deposes and says:

1. The undersigned is also the sole Director and the President of **PANDEBONO BAKERY INC**, a Florida corporation to be filed with the Florida Department of State on or about **October 18, 2022**.
2. The undersigned hereby consents to and authorizes the use by **PANDEBONO BAKERY INC**, of the name **PANDEBONO BAKERY INC**
3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.

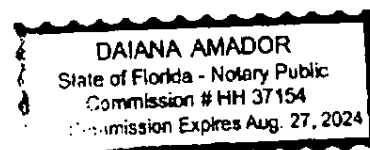
STATE OF FLORIDA           )  
  ) SS:  
COUNTY OF MIAMI-DADE )

  
AMPARO CADAVID

PERSONALLY appeared before me, **AMPARO CADAVID**, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 18 day of October 2022.

  
Notary Public Signature



**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: PANDEBONO BAKERY INC

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address  
7473 SW 8TH ST  
MIAMI FL 33144

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: AMPARO CADAVID (P) Name and Title: \_\_\_\_\_

Address 7473 SW 8TH ST Address: \_\_\_\_\_  
MIAMI FL 33144

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

Address \_\_\_\_\_ Address: \_\_\_\_\_

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: AMPARO CADAVID  
Address: 7473 SW 8Th ST  
Miami FL 33144

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: AMPARO CADAVID  
Address: 7473 SW 8Th ST  
Miami FL 33144

**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*

  
Required Signature/Registered Agent

10/18/2022  
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.*

  
Required Signature/Incorporator

10/18/2022  
Date