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# Project Devision of Coporations Division of Coporations

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Account Number : I20200000026 Phone : (786)413-4344 Fax Number : (305)222-9004

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## FLORIDA PROFIT/NON PROFIT CORPORATION LA HACIENDA INC

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January 18, 2023

### FLORIDA DEPARTMENT OF STATE Division of Corporations

L & R INTERNATIONAL FIRM INC

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### **COVER LETTER**

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

osed are an or	iginal and one (1) copy of the a	articles of incorporation and	l a check for:				
<b>X</b> \$70.00	□ \$78.75	□ \$78.75	□ \$87.50				
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of				
		ADDITIONAL CO	Status PPY REQUIRED				
FROM: _	MEYLING PEREZ						
	Name (Printed or typed)						
	4901 SW 61ST AVE						
	4701 344 0131 AVE		Address				
-	4701 3W 0131 AVE	Address					
-	DAVIE, FL 33314	Address					
-	DAVIE, FL 33314	Address ty. State & Zip					
_	DAVIE, FL 33314						

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

H23000019525 3

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

ARTICLE I NAMI The name of the corpora	E LA HACIEN	DA FRESH MARKET IN	С
ARTICLE II PRIN 4901 SW 61ST AV	Principal street address		dailing address, if different is: 61ST AVE
DAVIE, FL 33314	·	DAVIE, J	FL.33314
ARTICLE III PURP The purpose for which	POSE the corporation is organized is: _	ANY AND ALL LAW	FULL BUSINESS
ARTICLE IV SHAP The number of shares of	RES of stock is: 1000	CTORS	
	MEYLING PEREZ - PRI		
Address	4901 SW 61ST AVE	Address:	·
	DAVIE, FL 33314		
Name and Titl	le:	Name and Title:	
Address	,	Address:	•
Name and Titl	le <sup>,</sup>	Name and Title:	
Address			
/ rug t.a.		Address.	

i.			H23000019525 3
Name and Title:		Name and Title:	
Address		Address:	
		_	
	· · · · · · · · · · · · · · · · · · ·	_	
ARTICLE VI R The name and Flo	EGISTERED AGENT rida street address (P.O. Box NOT acceptable) of	the registered agent	is;
Name:	FRANCO ROBLES		
Address:	8410 WEST FLAGLER ST STE 205		
	MIAMI, FL 33144		
ARTICLE VII I	<u>NCORPORATOR</u>		
The name and ado	<u>fress</u> of the incorporator is:		
Name:	FRANCO ROBLES		٠.
Address:	8410 WEST FLAGLER ST STE 205		
	MIAMI, FL 33144		
Effective date, if o	EFFECTIVE DATE: 01/17/2023 other than the date of filing: 01/17/2023 ote is listed, the date must be specific and cannot	(OPT	IONAL) e days prior or 90 days after the
Note: If the date is the document's eff	inserted in this block does not meet the applicable feetive-date on the Department of State's records.	statutory filing requ	airements, this date will not be listed as
Having been nacht certificate, Lay fa	ed as registered agent to accept service of process for miliar with and accept the appointment as register	or the above stated c ed agent and agree	orporation at the place designated in this to act in this capacity
The	Required Signature/Registered Agent		01/17/2023
and the state of A	iment and affirm the facts stated herein are	4	Date
ducument to the b	iment and affirm that the facts stated herein are epartment of State constitutes a third degree felon	irue. I am aware ti y as provided for in	s.817.155, F.S.
gre	My 3.		01/17/2023
Required Signatur	e/Incorporator	<u> </u>	Date