

2/6/23, 11:27 AM

Division of Corporations
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P23000009519

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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : PERMITTING SPECIALIST OF FOOD & BEVERAGE INC
Account Number : 120190000062
Phone : (239)850-9451
Fax Number : (866)929-0535

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
YO! TACO CO.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

2023 02/06/23 11:12:00

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2023 FEB -6 PM 1:29
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

YOI TACO CO.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1375 ESTERO BLVD

FT MYERS BEACH, FL 33931

ARTICLE III PURPOSE

Any and all lawful business

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LAURA LAVALLE - PRES

Name and Title: ANTHONY LAVALLE - VP

Address 1375 ESTERO BLVD
FT MYERS BEACH FL 33931

Address: 1375 ESTERO BLVD
FT MYERS BEACH FL 33931

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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TALLAHASSEE, FLORIDA

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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: LAURA LAVALLE
Address: 1375 ESTERO BLVD
FT MYERS BEACH FL 33931

ARTICLE VII INCORPORATOR

The ~~name and address~~ of the incorporator is:

Name: LAURA LAVALLE
Address: 1375 ESTERO BLVD
FT MYERS BEACH FL 33931

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

Laura L. Lavalle
Required Signature/Registered Agent

2/16/2023
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.817.135, F.S.

Laura L. Lavalle
Required Signature/Incorporator

2/16/2023
Date

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