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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 : (305)552-5973 Phone Fax Number : (305)675-5944

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

Email	Address:				
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FLORIDA PROFIT/NON PROFIT CORPORATION 🕏 PINOLANDIA NO. 4 GROCERY CORP

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

SECRETARY OF STATE	PH 9: 05	THE TO
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

NAME: The name of the corporation is: ARTICLE I

	PINOLANDIA NO. 4 GROCERY CORP
	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
_	BERNARDO RUIZ
	1100 NW 119 ST. MIAMI, FL 33168
TICL	E III SHARES: The number of shares of stock is: 100
	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
	BERNARDO RUIZ Sesi dent
	JACQUELINE LEON V. V
ART]	CLE V INITIAL REGISTERED AGENT AND STREET ADDRI
he na	ne and Florida street address (PO Box not acceptable) of the registered a
	BERNARDO RUIZ
	4215 CLEVELAND ST. HOLLYWOOD, FL 33021
	The name and address of the Incorpor
ARTI	CLE VI INCORPORATOR: The name and address of the Incorpor

Required Signatures:

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

Registered Agent APRIL 26/2023

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.

Incorporator

APHIL 26/2023

Date