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Florida Department of State

Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION
MI LINDO MICHOACAN OF CLEWISTON INC

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

Electronic Filing Menu Corporate Filing Menu Help

1-8-25

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: MI LINDO MICHOACAN OF CLEWISTON INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

1030 SW C OWEN AVE
CLEWISTON FL, 33440

Mailing address, if different is:

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

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ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MIGUEL CHAVEZ BERMUDEZ - P

Address: 344 WASHINGTON AVE
HOMESTEAD, FL 33030

Name and Title: ARNULFO CHAVEZ BERMUDEZ - VP

Address: 344 WASHINGTON AVE
HOMESTEAD, FL 33030

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

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: ADA CRUZ

Address: 344 WASHINGTON AVE

HOMESTEAD, FL 33030

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ARTICLE VII INCORPORATOR

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

Name: MIGUEL CHAVEZ BERMUDEZ

Address: 344 WASHINGTON AVE

HOMESTEAD, FL 33030

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

Ada I Cruz
Ada I Cruz (Jan 6, 2025 11:00 CST)

Required Signature/Registered Agent

01-06-2024
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.

Miguel Chavez Bermudez (Jan 6, 2025 11:07 CST)

Required Signature/Incorporator

01-06-2024
Date