

P96000015829

TRANSMITTAL LETTER

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

SUBJECT: LA BELLE CAPOISE RESTAURANT, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

TOUVEI SAINT-PEUX
Name (printed or typed)

13518 MEMORIAL HWY
Address

MIAMI FL 33161
City, State & Zip

305-895-9445
Daytime Telephone number

600001718036
-02/19/96--01043--017
*****78.75 *****78.75

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

2/21/96

ARTICLES OF INCORPORATION

FILED
CLERK OF STATE
CORPORATIONS
96 FEB 19 11 044

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

LA BELLE CAPOISE RESTAURANT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

*13518 MEMORIAL HWY
MIAMI FL 33161*

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 share at \$10 par

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*POINT DU JOUR, COUTCHARD
1860 NE 142 ST #5J
MIAMI FL 33181*

See instructions for officers/directors

RICHARD C. ALEXANDRE
12675 NW 12 Ave
N. Miami FL 3361

15th day of February, 1996

Signature

Signature _____

Signature _____



SON
11784
1999
INC.

S. Wilson
2-15-96

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: LA BELLE CAPOISE RESTAURANT, INC.

2. The name and address of the registered agent and office is:

POINT DU JOUR, COUTCHARD
(NAME)

1860 NE 142 ST #5J
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

MIAMI FL 33161
(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C. T. C. R. T. L.
(SIGNATURE)

2-9-96
(DATE)