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TRANSMITTAL LETTER  
FILED

97 MAR 20 PM 2:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

100002118951--8

-03/20/97--01061--002

\*\*\*\*131.25 \*\*\*\*131.25

SUBJECT: UNIMASTER, INC.  
WHOLESALE OF RESTUARANT EQUIPMENT  
(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: MAIRA CAPOTE  
Name (Printed or typed)

8812 N.W. 150 STREET  
Address

MIAMI LAKES, FLA. 33018  
City, State & Zip

(305) 556-8647  
Daytime Telephone number

OK  
3/25/97

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

## ARTICLES OF INCORPORATION

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*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.*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be:

UNIMASTER, INC.

### ARTICLE II PRINCIPAL OFFICE

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

8812 N.W. 150 STREET  
MIAMI LAKES, FLA. 33018

### ARTICLE III SHARES

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

ONE HUNDRED (100) SHARES

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MAIRA CAPOTE  
8812 N.W. 150 STREET  
MIAMI LAKES, FLA. 33018

**ARTICLE V INCORPORATOR(S)**

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MAIRA CAPOTE  
8812 N.W. 150 STREET  
MIAMI LAKES, FLA. 33018

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

14th day of MARCH, 1997

(An additional article must be added if an effective date is requested.)



Signature

MAIRA CAPOTE / PRESIDENT & SECRETARY

Signature

Signature

**Notarization is not required**

**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**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 UNIMASTER, INC.

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

MAIRA CAPOTE  
(NAME)

8812 N.W. 150 ST.  
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

MIAMI LAKES, FLA. 33018  
(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.*

  
(SIGNATURE)

3-14-1997  
(DATE)

MAIRA CAPOTE/ PRESIDENT & SECRETARY