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TO: DIVISION OF CORPORATIONS

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FAX #: (850)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY

ACCT#: 072450003255

CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: LA TIA MARIA RESTAURANT, INC.

AUDIT NUMBER...... H97000015334

DOC TYPE..... FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS...0

PAGRS..... 5

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ARTICLES OF INCORPORATION

OF

LA TIA MARIA RESTAURANT, INC.

We the undersigned incorporate for the purpose of becoming a corporation under the laws of the State of Florida, providing for the formation, rights, privileges, immunities — and liabilities of incorporation for profit and subject to the following provisions.

ARTICLE I

The name of the corporation shall be:

LA TIA MARIA RESTAURANT, INC.

ARTICLE II

This corporation shall have perpetual existence.

ARTICLE III

This corporation is organized with the purpose to engage - in the transaction of restaurant, processed food, fast food, etc. import and export of foods and its by-products, and all other lawfull activities of business permitted under the laws of the State of Florida and of the United --- States of America.

ARTICLE IV

The agregate maximum number of shares which this corporation shall have authority to issue and have outstanding at anyone time is: 500 Hundred Shares at One Dollar Value each.

ARTICLE V

This corporation shall begin business with no less than -- Five Hundred Dollars (\$500.00).

ARTICLE VI

The post office address of the principal office of this -- corporation shall be: 5395 West 20 Avenue, Hisleah, Florida 33012.

Prepared By:
Jose C. Jimenez of
Jimenez and Associates, P.A.
454 N.W. 22nd Avenue, Ste 209
Miami, Florida 33125
Tel. (305) 541-4714

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ARTICLE VII

The name and address of the initial Registered Office of -- this corporation in the State of Florida is:

Maria E. Lopez 5395 West 20 Avenue Hialeah, Fla. 33012

ARTICLE VIII

The business of the corporation shall be managed by a Board of Directors. The number of Directors, no less than one, no more than five and shall be fixed by resolution of the --- stockholders at regular or special meetings, subject to the manner of holding such meetings prescribed by the by-laws.

ARTICLE IX

The name and post office address of the members of the Board of Directors who shall serve as members thereof, are as ---- follows:

NAME	OFFICE	ADDRESS	
Maria E. Lopez	President and	5395 West 20 Avenue	

ARTICLE X

Distribution to incorporators is as follows:

Maria E. Lopez 500 Shares \$ 500.00 Value

ARTICLE, XI

Each stockholder before offering to sell or otherwise dispose of the stock of this corporation, owned by him first offer — such stock to the remaining stockholders of this corporation and obtaining their refusal to purchase same, proceed to sell at the fair market value thereof.

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ARTICLE XII

Amendments to the Articles of Incorporation, merger, consolidations or dissolution shall be approved and submitted to the stockholders for approval 51 % of all votes will be necessary and thirty days notice shall be provided.

ARTICLE XIII

This corporation shall have full power to carry on and transact each or all business enumerated in Article III of this --Articles of Incorporation. Shall have all the general and ---additional powers now conferred upon it by the laws and the -by-laws.

IN WITNESS THEREOF, we the undersigned, have made subscribed and acknowledged these Articles of Incorporation, on this -- 15th Day of September 1997.

Maria E Lope.

Maria E. Lopez - Incorporator

STATE OF	FLORIDA)
)
COUNTY (OF DADE	•

who after first being duly sworn, executed the foregoing ---ARTICLES OF INCORPORATION. freely and voluntarily for the --purpose therein expressed.

IN WITNESS THEREOF I have hereunto set my hand and official - seal at Miami. said County and State, this 15th Day of Sep - tember 1997.

COMPLEAN MATARY MAIL
CONTROL MOTARY MAIL
CONTROL MOTARY MAIL
CONTROL MOTARY
CONTR

NOTARY PUBLIC, State of Florida at

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CERTIFICATE OF DESIGNATION REGISTERED AGENT=REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida — Statues, 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.

The name of the Corporation is LA TIA MARIA RESTAURANT, INC.

The name and address of the Registered Agent and office is Maria E. Lopez, 5395 West 20 Avenue, Hialeah, Fla. 33012

EP 16 PH 4:

Corporate Officer

Title: President

Dated: September 15, 1997.

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and further — agree, to comply with the provisions of all statues relative to the proper and complete performance of my duties; and —— accept the duties and obligations of section 607.325,, Florida Statutes.

Maria E. Lopez, Registered Agent accepting office.

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