# OFFICE USE ONL (Document #)

LAZARUS CORPORATE FILING SERVICE, INC.

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(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

700002585017--5 -07/10/98-01035--022 \*\*\*\*122.50 \*\*\*\*122.50

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. PINCON PANIO QUENO RESTAURANTE, /NC.
(Corporation Name) (Document #)

2. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

Walk in Pick up time 2.00 (Cortificate of Status)

Mail out Will wait Photocopy Certificate of Status

	NEW FILINGS
X	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS
Amendment
Resignation of R.A., Officer/Director
Change of Registered Agent
Dissolution/Withdrawal
Merger

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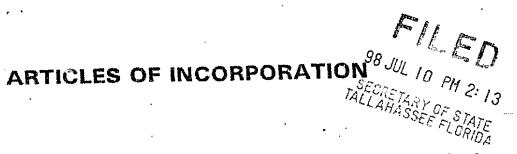
OTHER FILNGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

Examiner's Initials



CR2E031(9/92)



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:

RINCON ANTIOQUENO RESTAURANTE, INC

### ARTICLE II PRINCIPAL OFFICE

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

6521 SW 8 ST. MIAMI Fl. 33144

### ARTICLE III SHARES

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

Five hundred

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Hector J. Cadavid 1065 SW 75 Ave. MIAMI, Fl. 33144

# ARTICLE V INCORPORATOR(S)

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

AMPARO E. CADAVID, 1065 SW 75 AUR. MIAMI FT.
(President)

HECTOR J. CADVID ., 1065 SW 75 AUG. HIAMI.FL.
33140
(.TREASURY)

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

 $9\pi$  day of Jo/y 1998.

Ħ

X Amparo & Cadavid.

X Hew Gulffers Signature

Signature

Articles of Incorporation Filing Fee - \$35

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: Kincon Antioovens

	-
2. The name and address of the registered agent and office is:	
Hector J. CADAVID . FR &	77
(Name)	
1065 Sco 75 Ave. 36 5	
(P.O. Box not acceptable)	
MIAONI FL. 33144 700 5	
(City/State/Zip)	در

Kestaurante, INC.

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.

(Signaturé)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL