

TRANSMITTAL LETTER

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

9000002748459--2  
-01/20/99-01098-020  
\*\*\*\*122.50 \*\*\*\*\*78.75

SUBJECT:

Mi Casa Restaurant Co.

(Proposed corporate name - must include suffix)

FILED  
99 JAN 20 PM 4:46  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE

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:

Maria E. Torres

Name (Printed or typed)

3900 Oldfield Crossing Dr., #1209

Address

Jacksonville, FL 32223

City, State & Zip

(904) 886-9033

Daytime Telephone number

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

60  
1/25

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### **ARTICLE I NAME**

The name of the corporation shall be:

*Mi Casa Restaurant Co.*

### **ARTICLE II PRINCIPAL OFFICE**

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

*3900 Oldfield Crossing Dr., #1209  
Jacksonville, FL 32223*

### **ARTICLE III SHARES**

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

*100*

### **ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida street address of the initial registered agent are:

*Maria E. Torres  
3900 Oldfield Crossing Drive, Ste. 1209  
Jacksonville, FL 32223*

### **ARTICLE V INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

*Maria E. Torres  
3900 Oldfield Crossing Dr., Ste. 1209  
Jacksonville, FL 32223*

*[Signature]*  
Signature/Incorporator

*1/18/99*  
Date

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

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]*  
Signature/Registered Agent

*1/18/99*  
Date

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CLERK OF STATE  
TALLAHASSEE, FLORIDA