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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)541-3694 Fax Number : (305)541-3770

FLORIDA PROFIT CORPORATION OR P.A.

LA CASITA FOOD PRODUCCTS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
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6/7/99 10:56 AM



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ARTICLES OF INCORPORATION

<u>OF</u>

LA CASITA FOOD PRODUCTS, INC.

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 CASITA FOOD PRODUCTS, INGS

99 JUN-7 PM 1:05
SECRETARIOS FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

8840 NW 17th Manor Coral Springs, Fl 33071

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 (Five Hundred) at \$1.00 Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

FELIFE A. SOLARI 8840 NW 17th Manor Coral Springs, FI 33071

MARCOS A. GUERRA CPA, P.A. 3863 S.W 6th STREET BUILTE \$10 MIAMI, FLORIDA 33135

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ARTICLE V INCORPORATOR(S)

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

Francois AUBRY 16 RUE DE BASSIEUX 69480 ANSE FRANCE

Republic of France City of Lyon Consulate of the United Senses of America I hereby cartify that on this day the individual appeared before we and acknowledged to m instrument may executed freely and volunts AAA CONTROL	i (a) named below a that the attached rily
Build)	
phila all	dala
Consult of the United States of America	

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

6_ day of	<u>MAY</u> , 19 ⁹⁹ .
_ *	\$ignature/Title Francois Aubry/President
	Signature/Title
	Signature/Title
STATE OF	
COUNTY OF	
ARKEN BOREGOIMEN BOX FRUMEN	SERGER SOND MEDICAL SERVICE OF STREET SERVICE
MEXELLEXXXXXXDAXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXqqqXxxxxqq qxxxxx q qxxxxxxxxxx
	OF
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NOTARY RHILLY

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the tate of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

2. The name and address of the registered agent and office is: FELIPE A. SOLARI	1. The name of the corporation is: LA CAS	SITA FOOD PRODUCTS, IN	NC.
(P.O. BOX NOT ACCEPTABLE) CORAL SPRINGS, FL 33071 (CITY/STATE/ZIP) SIGNATURE (Corporate officer) TITLE PRESIDENT DATE 5/6/99 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		d agent and office is:	99 JUN SECTION TALLAH)
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