PO 6000019886

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

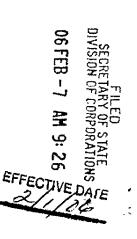
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COVER LETTER

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

suвлест: La Casita Mexican Food	i Inc.		
(PROPOSED CORPORATE) Enclosed are an original and one (1) copy of the artic			
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM: SYLVIA PORTUGAL			
Name (Printed or typed)			
12555 U.S. HWY 90	WEST		
DEFUNIAK SPRINGS	, FL 32433 State & Zip		
850) 918-0067 Daytime Telephone number			

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLE I NAME

06 FEB -7 AM 9: 26

The name of the corporation shall be:

La Casita Mexican Food Inc.

EFFECTIVE DATE: FEBRUARY 1, 2006

EFFECTIVE DAIL

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

12555 U.S. Hwy 90 West DeFuniak Springs, FI 32433

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Restaurant, Food & Food Service

ARTICLE IV SHARES

The number of shares of stock is: 100 Sh. @ \$1.00 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Sylvia Portugal - President 12555 U. S. Hwy 90 West DeFuniak Springs, FI 32433

ARTICLE VI ___REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Sylvia Portugal 12555 U.S. Hwy 90 West DeFuniak Springs, Fl 32433

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Sylvia Portugal 12555 U.S. Hwy 90 West DeFuniak Springs, Fl 32433

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Soluis Column	02/03/05
Signature/Registered Agent	Date
Skun) Johnson	02/03/05
(Signature/Incorporator)	Date