

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : EXPRESS BUSINESS & TAX SERVICES INC
Account Number : I20220000138
Phone : (786)239-9353
Fax Number : (305)675-8465

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: AIMET@EXPRESSTAXSVCS.COM

FLORIDA PROFIT/NON PROFIT CORPORATION
THE QUICKIE MINI MARKET INC

Certificate of Status	1
Certified Copy	1
Page Count	04
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COVER LETTER

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

SUBJECT: THE QUICKIE MINI MARKET INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: CRISTIAN G. AMARO

Name (Printed or typed)

7601 DAVIE RD EXTENSION

Address

HOLLYWOOD, FL 33024

City, State & Zip

305-479-1384

Daytime Telephone number

AIMET@EXPRESSTAXSVCS.COM

E-mail address: (to be used for future annual report notification)

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)

ARTICLE I NAMEThe name of the corporation shall be: THE QUICKIE MINI MARKET INC**ARTICLE II PRINCIPAL OFFICE**Principal street address
7601 DAVIE RD EXTENSION
HOLLYWOOD, FL 33024Mailing address, if different is:
7601 DAVIE RD EXTENSION
HOLLYWOOD, FL 33024**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 1,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: CRISTIAN G. AMARO - PD

Name and Title: _____

Address 7601 DAVIE RD EXTENSION
HOLLYWOOD, FL 33024

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2025 JAN 26 PM 4:24
STATE
FL

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: CRISTIAN G. AMAROAddress: 7601 DAVIE RD EXTENSIONHOLLYWOOD, FL 33024**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: CRISTIAN G. AMAROAddress: 7601 DAVIE RD EXTENSIONHOLLYWOOD, FL 33024**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Cristian G. Amaro

Required Signature/Registered Agent

01/23/2025

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Cristian G. Amaro

Required Signature/Incorporator

01/23/2025

Date