

# P23000030034

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From:  
Account Name : ALLSTATE CORPORATE SERVICES CORP  
Account Number : I2004000031  
Phone : (800)906-9220  
Fax Number : (800)906-9880

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

Email Address: \_\_\_\_\_

RECEIVED  
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CORPORATIONS  
COMMERCIAL  
SERVICES

**FLORIDA PROFIT/NON PROFIT CORPORATION  
MS LUXURY SUITES CORP**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 1       |
| Certified Copy        | 0       |
| Page Count            | 03      |
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M.A.

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

**ARTICLE I NAME**

The name of the corporation shall be: MS LUXURY SUITES CORP

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1985 S OCEAN DR # PHH

\_\_\_\_\_

HALLANDALE BEACH, FL 33009

\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY LAWFUL PURPOSE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV SHARES**

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: MIKAIL STRUZBERG, PRESIDENT

Name and Title: MARIA ELIZABETH STRUZBERG, VP

Address: 1985 S OCEAN DR #PHH

Address: 1985 S OCEAN DR #PHH

HALLANDAE BEACH, FL 33009

HALLANDAE BEACH, FL 33009

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

2023 APR 14 AM 4:54  
FALL HASTIE, FLORIDA

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: MIKAIL STRUZBERG  
 Address: 1985 S OCEAN DR #PHH  
HALLANDAE BEACH, FL 33009

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: MIKAIL STRUZBERG  
 Address: 1985 S OCEAN DR #PHH  
HALLANDAE BEACH, FL 33009

**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:*

/s/ MIKAIL STRUZBERG  
 Required Signature/Registered Agent

04/05/2023  
 Date  
 2023 APR 11 AM 4:54

*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.*

/s/ MIKAIL STRUZBERG  
 Required Signature/Incorporator

04/05/2023  
 Date  
 2023 APR 11 AM 4:54