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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 02 APR -3 PM 3:31

SECKETA STATE TALLAHASSEE, FLORIDA

SUBJECT:	MAZILI HOSPITALITY, INC		*****78.75	*****78.75
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	•
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	d a check for:	
\$70.00 Filing Fee	▼ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	JULIAN A MAZILI			
_	Name (Printed or typed) 9204 KNIGHTS BRANCH ST Address			
-	TAMPA, FL 33637 City, S	State & Zip		
	813-78	34-8472		

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

Daytime Telephone number

ARTICLES OF INCORPORATION

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

FILED

02 APR -3 PM 3:31

SECRETANT OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

MAZILI HOSPITALITY , INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

9204 KNIGHTS BRANCH ST TAMPA, FL 33637

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HOTEL MANAGEMENT

ARTICLE IV _ SHARES

The number of shares of stock is:

1 share

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JULIAN A. MAZILI , 9204 KNIGHTS BRANCH ST TAMPA,FL 33637

PRESIDENT & CEO

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JULIAN MAZILI 9204 KNIGHTS BRANCH ST TAMPA, FL 33637

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JULIAN A MAZILI 9204 KNIGHTS BRANCH ST TAMPA, FL 33637

re/Incorporator D