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(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	9 #)
PICK-UP	☐ WAIT	MAIL
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(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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Office Use Only

TRANSMITTAL LETTER

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

SUBJECT:		Stage Di	/
	(PROPOSED CORPORA	te name – <u>most incl</u>	ODE SOFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM:		Colonia L Address	
	City	F C.,	52707
	407-	275 - 247	

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 NAME

The name of the corporation shall be:

BACK STAGE DINER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 23748 EAST COLONIAL DRIVE CHRISTMAS, FLORIDA 32709

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: RESTAURANT

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DEAN MONACO PRESIDENT, 23748 EAST COLONIAL DRIVE CHRISTMAS, FL. 32709

ARTICLE VI REGISTERED AGENT

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

DEAN MONACO, 23748 EAST COLONIAL DRIVE CHRISTMAS, FL. 32709

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Signature/Incorporator

DEAN MONACO, 23748 EAST COLONIAL DRIVE CHRISTMAS, FL. 32709

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