

P110000091092

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

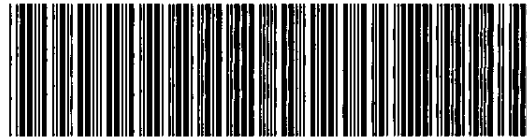
(Document Number)

Certified Copies _____ Certificates of Status _____

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W11000043871



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SECRETARY OF STATE
DIVISION OF CORPORATION
2011 OCT 17 PM 4:08

10/18/11

COVER LETTER

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

SUBJECT: CLUB HAZE LOUNGE AND RESTAURANT CORP.
(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 Filing Fee
☐ \$78.75 Filing Fee & Certificate of Status

☐ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

Status

FROM: ROCIO BELMONTES

Name (Printed or typed)

4 NORTH KROME AVENUE

Address

HOMESTEAD, FL 33030

City, State & Zip

305-910-5747

Daytime Telephone number

rocio Belmontes@gmail.com

e-mail address: (to be used for future notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 23, 2011

ROCIO BELMONTES
4 NORTH KROME AVENUE
HOMESTEAD, FL 33030

SUBJECT: CLUB HAZE LOUNGE & RESTAURANT CORP.
Ref. Number: W11000043871

We have received your document for CLUB HAZE LOUNGE & RESTAURANT CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 311A00019723

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DIVISION OF CORPORATIONS
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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: Club Haze Lounge & Restaurant Corp.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
4 NORTH KROME AVENUE
HOMESTEAD, FL 33030

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO FUNCTION AS A RESTURANT/BAR

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROCIO BELMONTES (PRESIDENT/OWNER)
Address: 4 NORTH KROME AVENUE
HOMESTEAD, FL 33030

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: ROCIOBELMONTES
Address: 4 NORTH KROME AVENUE
HOMESTEAD, FL 33030

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: ROCIO BELMONTES
Address: 4 NORTH KROME AVE
HOMESTEAD, FL33030

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

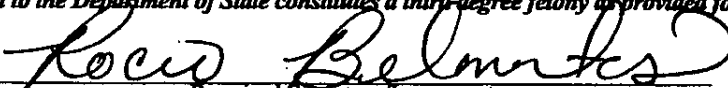


Required Signature/Registered Agent

6/14/11

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.



Required Signature/Incorporator

6/14/11

Date

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