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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305) 599-0839
Fax Number : (305) 592-9591

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

Melo's Cafe, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

[Signature] 02/24/14

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: Melo's Cafe, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

62 NE 14 Street

Miami, FL 33132

Mailing address, if different is:

1800 N. Miami Avenue

Miami, Florida 33136

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Melo, Luiz R DPS

Address: 1800 N. Miami Avenue
Miami, FL 33136

Name and Title: Schmidt, Christa DVT

Address: 1800 N. Miami Avenue
Miami, FL 33139

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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FEB 21 PM 1:02
MIAMI, FL 33136

(cont.)

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: Colletti, Joseph R
Address: 4770 Biscayne Blvd., Ste 630
Miami, FL 33137

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Steve Polisar, Esq.
Address: 407 Lincoln Road, Suite 2A
Miami Beach, FL 33139

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

2/20/2014

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 §817.135, F.S.


Required Signature/Incorporator

2/20/2014

Date

FILED
FEB 21 2014
CLERK OF CIRCUIT COURT
MIAMI, FLORIDA