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(Requestor's Name)				
(Address)				
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ty/State/Zip/Phone	e #)			
☐ WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
_ Certificates	of Status			
Special Instructions to Filing Officer:				
	idress) ty/State/Zip/Phone WAIT siness Entity Nar cument Number) Certificates			

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SECULIA NO OF STATE



COVER LETTER

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

SUBJECT: Hollywood Lodging, Inc.						
TE NAME – <u>MUST INCLI</u>	UDE SUFFIX)					
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:						
\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status					
ADDITIONAL CO	PY REQUIRED					
I. Barry Blaxberg, Esq. Name (Printed or typed) 25 SE 2nd Avenue, Suite 730						
Miami, FL 33131						
City, State & Zip						
xgray.com		SHOUS ALE				
	Eles of incorporation and \$78.75 Filing Fee & Certified Copy ADDITIONAL CO Esq. (Printed or typed) e, Suite 730 ddress State & Zip . 311 Jephone number xgray.com	Eles of incorporation and a check for: \$78.75 \$\sigma\$ \$87.50 Filing Fee Filing Fee, & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Esq. (Printed or typed) e, Suite 730 ddress State & Zip . 311 lephone number				

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) SECRETARY OF STATE
ARTICLE I NAM The name of the corporat	— — — (1) (1) (1) (1) (1) (1) (1) (1)	or Chapter 621, F.S. (Profit) SECRETARY OF STATE INVISION OF CURPORATIONS
•	NCIPAL OFFICE	14 MAR 10 PM 2: 46
	Principal street address	Mailing address, if different is:
2011 Veasly S	Street	_2011 Veasly Street
Greensboro,	NC 27407	Greensboro, NC 27407
	POSE ne corporation is organized is: USINESS permitted by law.	
		s Name and Title: Jayesh N. Patel, Director
Address	200 Biscayne Blvd. Way	Address: 2011 Veasly Street
Mudicos	Unit #5109	Greensboro, NC 27407
	Miami, FL 33131	
Name and Title:	Anit S. Patel, Director	Name and Title:
Address	13572 NW 2nd Manor	Address:
	Unit #103	
	Plantation, FL 33325	
Name and Title:		Name and Title:
Address		Address:

Name and	Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
The name and Flo	orida street address (P.O. Box NOT acceptable) of	he registered agent is:
Name:	I. Barry Blaxberg, Esq.	
Address:	25 SE 2nd Avenue, Ste 730	
	Miami, FL 33131	
ARTICLE VII	INCORPORATOR	
The name and ad	dress of the Incorporator is:	
Name:	I. Barry Blaxberg, Esq.	
Address:	25 SE 2nd Avenue, Ste 730	
	Miami, FL 33131	
Having been nam this certificate, I a	ned as registered agent to accept service of process of m familiar with any accept the appointment as region Required Signature/Registered Agent	For the above stated corporation at the place designated in stered agent and agree to act in this capacity 3/2/20/4 Date
	ument and affirm that the facts stated-herein are to Department of State constitutes a third degree felony	rue. I am aware that the false information submitted in a as provided for in s.817.155, F.S.
	Required Signature/Incorporator	Date
		₹

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