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Florida Department of State

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# FLORIDA PROFIT/NON PROFIT CORPORATION

Bolia Hospitality Inc.

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Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

OF 4

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#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

**Bolia Hospitality Inc.** 

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

450 Commerce Way, Suite 100 Longwood, FL 32750

## ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Hassan Miyanji 450 Commerce Way, Suite 100 Longwood, FL 32750

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

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# ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Hassan Miyanji - President/Director 419 Brentwood Club Cove, Longwood, FL 32750

### ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Hassan Miyanji 419 Brentwood Club Cove, Longwood, FL 32750

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

28th day of August 20 14

Hassan Miyanji Signature

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE STATE OF FLORIDA. SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Bolla Ho	ospitality Inc.	-
2. The name and address of the registered agent	and office is:	
<u>Hass</u>	an Miyanji	
	Name	
450 (	Commerce Way, Suite 100	
	(P.O. Box or Mail Drop Box NOT Acceptable)	
Long	wood, FL 32750	بارم بر مر
<del></del>	(City / State / Zip)	
	3	
corporation at the place designated in this coagent and agree to act in this capacity. I furt	to accept service of process for the above stated ertificate, I hereby accept the appointment as registered ther agree to comply with the provisions of all the statutes ance of my duties, and am familiar with and accept the t.	ASSECT CARSA
Hassan Miyanji SIGNATURE		