

P15000028568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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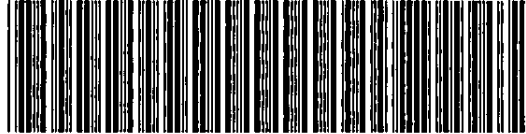
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/24/15--01029--009 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
15 MAR 24 PM 3:45

03/27/15

COVER LETTER

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

SUBJECT: Deli Plaza Coffee Shop, Corporation
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75
Filing Fee	Filing Fee & Certificate of Status

<input checked="" type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status

ADDITIONAL COPY REQUIRED.

FROM: MAX A. GOLDFARB, Attorney
Name (Printed or typed)

19 West Flagler Street, Suite 703
Address

Miami, Florida 33130

City, State & Zip

305-371-2538

Daytime Telephone number

max@maxgoldfarb.com

E-mail address: (to be used for future annual report notification)

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: Deli Plaza Coffee Shop, Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1800 S.W. 5th Avenue

same

Miami, Florida 33129

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: coffee shop, deli, wine and
food and all other legal business

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jose Angel Rojas, Pres

Name and Title: Miriam Companioni, Secretary, Treasurer

Address 1800 S.W. 5th Avenue

Address: 1800 S.W. 5th Avenue

Miami, Florida 33129

Miami, Florida 33129

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(conti.)

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: Jose Angel Rojas

1800 S.W. 5th Avenue

Address: _____

Miami, Florida 33129

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jose Angel Rojas

1800 S.W. 5th Avenue

Address: _____

Miami, Florida 33129

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

X 

Required Signature/Registered Agent Jose Angel Rojas

3/19/15

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.

X 

Required Signature/Incorporator Jose Angel Rojas

3/19/15

Date