

P15000042889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

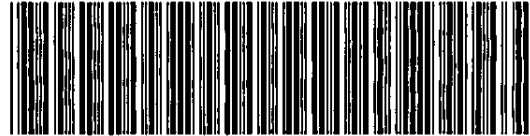
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

193-637-647.

121500023111



900271097029

03/30/15--01046--010 \*\*78.75

15  
5/13/15

FILED  
15 MAY - 4 PM 4: 58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COVER LETTER

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

FILED  
15 MAY -4 PM 4:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: IL PIZZARELLO WOOD FIRED PIZZA INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

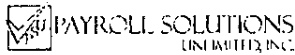
☐ \$70.00 Filing Fee  
☒ \$78.75 Filing Fee  
& Certificate of Status

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

**ADDITIONAL COPY REQUIRED**

FROM: RUBENS MULLAJ  
Name (Printed or typed)  
14574 SW 94th Lane  
Address  
MIAMI, FL 33186  
City, State & Zip  
305-766-4884  
Daytime Telephone number  
INFO@ILPIZZARELLOMIAMI.COM  
E-mail address: (to be used for future annual report notification)

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



"WHERE YOUR BUSINESS ALWAYS COMES FIRST"

Office: 305-259-3175  
Fax: 305-233-3527  
5201 BLIE LAGOON DRIVE, SUITE 800  
EIN: 26-2563982  
PTIN: P00709460  
CAF #: 0305-33368R  
Registered agent  
INFO@PAROLLSOLUTIONSUNLIMITED.COM  
WWW.PAYROLLSOLUTIONSUNLIMITED.COM

Attn:  
Florida Department of State  
Division Of Corporations  
P. O. Box 6327  
Tallahassee, FL 32214

SUBJECT: Originally incorrect form was used, Name correction made, and client was also updated to a new address.

IL Pizzarello Wood Fired Pizza Inc  
14574 SW 94<sup>th</sup> Lane  
Miami, FL 33186

Dear Ms Claretha Golden,

Our apologies, originally we had used the incorrect form, this is a domestic profit corporation. As a result we are summiting corporation with correct form. My client also decided to shorten company name of his company to: IL Pizzarello Wood Fired Pizza Inc. My client also move this week, and he is also up dating his address to: 14574 SW 94<sup>th</sup> Lane, Miami, FL 33186. This my direct phone number if you have any questions.

We apologies for the incontinence.

Thank you,

Carlos E Sosa  
Registered agent  
786-525-7367

FILED  
15 MAY -4 PM 4:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FILED

15 MAY -4 PM 4: 58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

April 21, 2015

RUBENS MULLAJ  
10420 SW 158TH CT #203  
MIAMI, FL 33196

SUBJECT: IL PIZZARELLO WOOD FIRED PIZZA INC  
Ref. Number: W15000023111

We have received your document for IL PIZZARELLO WOOD FIRED PIZZA INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

You failed to make the correction(s) requested in our previous letter.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Should this be a Florida profit corporation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6052.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 815A00008013





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
15 APR 20 PM 12:38  
TALLAHASSEE, FLORIDA

April 2, 2015

RUBENS MULLAJ  
10420 SW 158TH CT #203  
MIAMI, FL 33196

SUBJECT: IL PIZZARELLO WOOD FIRED PIZZA MOBILE CATERING  
Ref. Number: W15000023111

We have received your document for IL PIZZARELLO WOOD FIRED PIZZA MOBILE CATERING and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6052.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 415A00006610

FILED  
15 MAY - 4 PM 4:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 04/21/15

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

15 MAY -4 PM 4: 58

ARTICLE I NAME

The name of the corporation shall be: IL PIZZARELLO WOOD FIRED PIZZA INC

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

14574 SW 94th Lane

14574 SW 94th Lane

MIAMI, FL 33186

MIAMI, FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO CONDUCT BUSINESS IN THE STATE OF FLORIDA BY  
SELLING WOOD OVEN PIZZA AND OPEN BANK

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RUBENS MULLAJ, PRESIDENT

Name and Title: \_\_\_\_\_

Address 14574 SW 94th Lane

Address: \_\_\_\_\_

MIAMI, FL 33186

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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: CARLOS E SOSA

Address: 5201 BLUE LAGOON DRIVE, SUITE 800

MIAMI, FL 33126

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: RUBENS MULLAJ

Address: 14574 SW 94th Lane

MIAMI, FL 33186

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15 MAY -4 PM 4:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VIII EFFECTIVE DATE:** 4/27/15

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

4/27/15

\_\_\_\_\_  
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.*

\_\_\_\_\_  
Required Signature/Incorporator

4/27/15

\_\_\_\_\_  
Date