

P16000296984

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000300875 3)))



H160003008753ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800) 221-2972
Fax Number : (888) 692-9256

****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

VJM Pizza, Inc.

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

16 DEC - 8 AM 9:18
DIVISION OF CORPORATIONS
STATE OF FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 09 2016

T. SCOTT

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: VJM Pizza, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

614 South East 10th Street

614 South East 10th Street

Deerfield Beach, FL 33441

Deerfield Beach, FL 33441

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

To conduct all activities set forth and permitted under and Florida corporation law

ARTICLE IV SHARES

The number of shares of stock is: 100 with a par value of .01

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mark Maffei, Director

Name and Title: _____

Address 1230 S Military Trail
Deerfield Beach FL 33442

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

16 DEC - 8 AM 9:16

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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: Mark Maffei
Address: 1230 S Military Trail
Deerfield Beach FL 33442

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Mark Maffei
Address: 1230 S Military Trail
Deerfield Beach FL 33442

ARTICLE VIII EFFECTIVE DATE:

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

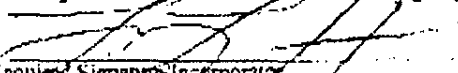
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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

X  12/07/16
Required Signature/Registered Agent: 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  12/07/16
Required Signature/Incorporator: Date: