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(F	Requestor's Name)	
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(/	Address)	
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(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(<u>i</u>	Business Entity Name)	
([Document Number)	
Certified Copies	Certificates of	Status
Special Instructions t	to Filing Officer:	

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D O'KEEF! JUL 17 2017

WM-54321

COVER LETTER

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

SUBJECT: New York 5	Piedle and Rib Pit					
(PROPOSED CORPORA	TE NAME - MOST INCLUDE SUFFIX)					
Enclosed are an original and one (1) copy of the arti	icles of incorporation and a check for:					
□ \$70.00 □ \$78.75 Filing Fee Filing Fee & Certificate of Status	□ \$78.75 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED					
FROM: Joseph De Vigil; Name (Printed or typed)						
125158 14 Court Address						
Deer Field Beach Fl 33441 City, State & Zip						
954 682 - 6510 Daytime Telephone number						
E-mail address: (to be used for future annual report notification)						

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 29, 2017

JOSEPH DEVIGILI 1251 SE 14 COURT DEERFIELD BEACH, FL 33441

SUBJECT: NEW YORK SPIEDIE AND RIB PIT

Ref. Number: W17000054321



We have received your document for NEW YORK SPIEDIE AND RIB PIT and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return 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.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 717A00013250

7 JUL 14 PM 12: 38

PIVISION OF COSPOSATIONS

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

	<u>IPAL OFFICE</u>		compan Compan
	Principal street address		Mailing address, if different is:
	14 Court		
DRECFIELD	Beach FZ		
33441			
RTICLE III PURPO	DSF		
ne purpose for which th	he corporation is organized is:	DroFit	
	,		
			(i)
RTICLE IV SHARI	ES		
RTICLE V INITIA	I AFFICERS AND/OP DIRECT		
Name and Title	5 Joseph Devi	ORS 9/11 Presider Name and Title	Jr Joseph Devig
Name and Title	: Joseph DeVi	ORS Gili Presicles Name and Title Address:	Joseph Devig Fresident
Name and Title	1251 SE 14 Cour	Address:	1251 Se 14 Cour
Name and Title Address	DeerField Bea	Address:	Joseph Devig " President 1251 Se 14 Cour Deer Field Beach
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Name and Title:_		Name and Title:_		
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	Wenter & Court			
The name and Florida st	ERED AGENT reet address (P.O. Box NOT acceptable) of	the registered agen	ıt is:	
Name:	oseph Devigili			
Address: /c	7515E14 Cour	1		
	- 1	-Z 334	/	
ککیک	T. T. C. O. O. C. K. T.	アクライ	4 /	
ARTICLE VII INCORE	<u>PORATOR</u>			
The name and address of	the Incorporator is:			
Name:	Joseph DeVicili			,
Address: j-	751 SE 14 Cour	/		* ; ::::
<u> </u>		FL 33 5	() (L) 1	(건 스)
\star	WHIT IE IM CONCE	1 6.50,	7 7 (·
ARTICLE VIII EFFEC	CTIVE DATE:			
	in the date of filing: $\frac{1}{2}$ UNC $\frac{2}{2}$ ted, the date must be specific and cannot			90 days after the
filing.)	•			
	in this block does not meet the applicable	statutory filing requ	uirements, this d	ate will not be listed as
the document's effective (date on the Department of State's records.			
Having been named as re	egistered agent to accept service of process	for the above state	ed corporation a	t the place designated in
inis certificate, I am jamil	liar with and accept the appointment as reg	istered agent and a	gree to act in thi	
- Joseph	Required Signature/Registered Agent			6/24/17
I submit this document a	nd affirm that the facts stated herein are i	tena Lam awara n	hat the foles inf	Date
document to the Departm	ent of State constitutes a third degree felon	rae. Furn uwure n Fas provided for in	s.817.155, F.S.	ormanon suominea m a
Sozen	De 1/20- 1.			6/24/17
Required Sign	ature/Incorporator			Date