P18000012872

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.

(((H18000047279 3)))

H18000047279ABC5

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I28000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

18 FEB -6 PM 4:39

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
EMPIRE LOUNGE & PIZZERIA INC

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

2018 FEB -8 P 1:05

N. SAMS

FEB 09 2018

Electronic Filing Menu Corporate Filing Menu Help

ARTICLES OF INCORPORATION

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

H18000047219

ARTICLE I NAME: The name of the corporation is:

Empire Lounge & Pizzeria Inc

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

5920 South Dixie Hwy
South Miami, FL 33143

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Masoud Memar (P)

FILED
18 FEB -6 PM 4:33
TALLAHASSEE, FLORIDA

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Masoud Memar
5920 South Dixie Hwy
South Miami, FL 33143

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Masoud Memar
5920 South Dixie Hwy
South Miami FL 33143

H18000047279

Required Signatures:

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

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.

Incorporator Date

EIN: 21-5731091

18 FEB -6 PM 4:33

TALLAHASSEE, FLORIDA

H18000047279