

P18 000 020 986

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

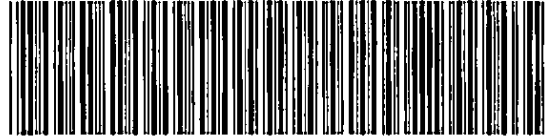
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/15/17--01018--031 **70.00

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18 MAR -2 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



W17 - 12737

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MAR 07 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 14, 2017

DINA JOHNSON
P.O. BOX 7912
DELRAY BCH., FL 33482

SUBJECT: THE DAVIE ROADHOUSE, INC
Ref. Number: W17000012737

We have received your document for THE DAVIE ROADHOUSE, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 417A00002864

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18 MAR -2 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 9, 2017

Florida Department of State
Divisions of Corporations, Clifton Bldg
2661 Executive Center Circle
Tallahassee FL 32301

Re: THE DAVIE ROAD HOUSE, INC

To whom it may concern:

Please find enclosed the Articles of Amendment for filing regarding The Davie Road House, Inc. I, Dina Johnson, President of The Davie Road House, Inc, have no plans to reinstate this company but would like the Articles of Amendment processed as soon as possible. I understand the effective date will be for 2017.

Please process this request at your earliest convenience and should you have any further questions, please do not hesitate to contact me at 561-577-3400.

Sincerely,

A handwritten signature in black ink that reads "Dina Johnson". The signature is written in a cursive, flowing style.

Dina Johnson,
President

COVER LETTER

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

SUBJECT: THE DAVIE ROAD HOUSE, 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 ☐ \$78.75
Filing Fee Filing Fee
& Certificate of Status

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

ADDITIONAL COPY REQUIRED

FROM: DINA JOHNSON

Name (Printed or typed)

PO BOX 7912

Address

DELRAY BEACH FL 33482

City, State & Zip

954-577-3400

Daytime Telephone number

dmoj@bellsouth.net

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: THE DAVIE ROAD HOUSE, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

4252 SW 64TH AVE

DAVIE FL 33325

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: COMMERCIAL RENTAL

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DINA JOHNSON, PRESIDENT

Address PO BOX 7912

DELRAY BEACH FL 33482

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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TALLAHASSEE, FLORIDA

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: ANTHONY G COLEMAN JR
Address: 4171 W HILLSBORO BLVD, STE 8
COCONUT CREEK FL 33073

ARTICLE VII INCORPORATOR

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

Name: Coleman & Cohen LLC
Address: 4171 W Hillisboro Blvd Ste 8
Coconut Creek FL 33073

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TALLAHASSEE, FLORIDA

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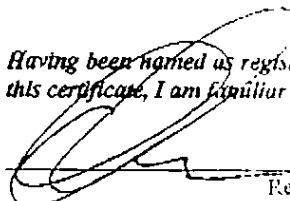
ARTICLE VIII EFFECTIVE DATE:

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 days prior or 90 days after the filing.)

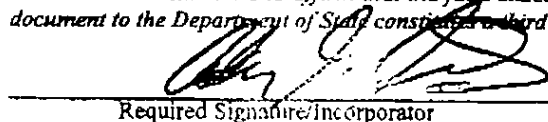
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

2/9/17
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

0302-18
Date