

7/2/2019

PI 190000052433

Florida Department of State
Division of Corporations
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To: Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION

Mastronardi Group Liquor Investment, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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Corporate Filing Menu

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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: Mastronardi Group Liquor Investment, Inc.

ARTICLE II. PRINCIPAL OFFICE.Principal street address:

Mailing address, if different is:

4900 N. Ocean Blvd., Unit 1617, Sea Ranch Building CLauderdale by the Sea, FL 33308**ARTICLE III. PURPOSE.**

The purpose for which the corporation is organized is:

ARTICLE IV. SHARES.

The number of shares of stock is: 1,000

ARTICLE V. INITIAL OFFICERS AND/OR DIRECTORS.

Name and Title:	<u>Paul Mastronardi, President</u>	Name and Title:	<u>Paul Mastronardi, Director</u>
Address:	<u>4900 N. Ocean Blvd., Unit 1617</u>	Address:	<u>4900 N. Ocean Blvd., Unit 1617</u>
	<u>Sea Ranch Building C</u>		<u>Sea Ranch Building C</u>
	<u>Lauderdale by the Sea, FL 33308</u>		<u>Lauderdale by the Sea, FL 33308</u>
Name and Title:	<u>Paul Mastronardi, Secretary</u>	Name and Title:	<u>Paul Mastronardi, Treasurer</u>
Address:	<u>4900 N. Ocean Blvd., Unit 1617</u>	Address:	<u>4900 N. Ocean Blvd., Unit 1617</u>
	<u>Sea Ranch Building C</u>		<u>Sea Ranch Building C</u>
	<u>Lauderdale by the Sea, FL 33308</u>		<u>Lauderdale by the Sea, FL 33308</u>
Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
	_____		_____
	_____		_____

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Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
	_____		_____
	_____		_____

ARTICLE VI. REGISTERED AGENTThe ~~name and Florida street address~~ (P.O. Box NOT acceptable) of the registered agent is:

Name: PAUL MASTRONARDI
Address: 4900 N. Ocean Blvd., #1617, Sea Ranch Bldg C
Lauderdale by the Sea, FL 33308

ARTICLE VII. INCORPORATORThe ~~name and address~~ of the Incorporator is:

Name: PAUL MASTRONARDI
Address: 4900 N Ocean Blvd #1617, Sea Ranch C
Lauderdale by the Sea, FL 33308

ARTICLE VIII. EFFECTIVE DATE

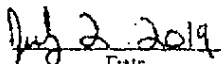
Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

X  _____
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  _____
Required Signature/Incorporator


Date

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