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## COVER LETTER

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

SUBJECT: N	EW YORK ROMA PIZZA & P	ASTA CG, CORP	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an or	riginal and one (1) copy of the ar	ticles of incorporation and	l a check for:
⊠ \$70.00 Filing Fee	☐ S78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM: _	Calvin Azadi, Esq.	e (Printed or typed)	
	78 SW 7th. St., Suite 500	Address	
	Miami, Fl 33130	Address	
	City	. State & Zip	
	786-757-6877	Talashana nambar	<del></del>
	calvin@azadilaw.com	elephone number	
		d for future annual report r	otification)

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)

<u>ARTICLE I NAME</u>		
The name of the corporation shall be:NEW YORK RON	AA PIZZA & PASTA C	CG, CORP
ARTICLE II PRINCIPAL OFFICE  Principal street address 2985 McFarlane Rd, Miami, FL 33133-6010	Mailin 2900 SW 100 Ave	g address, if different is: e, Miami, FL 33165
2500 Mill Brane 150, Milliam, 1 2 30133-0010	2900 SW 100 AVE	e, Miami, FE 33103
ARTICLE III PURPOSE The purpose for which the corporation is organized is:any and all	ll lawful business	
· · · · · · · · · · · · · · · · · · ·		
ARTICLE IV SHARES The number of shares of stock is:		
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS		707 200
Name and Title: Tomas Euvin, Director	Name and Title:	OFE!
Address 2900 SW 100 Ave, Miami, FL 33165	Address:	
		The state of the s
Name and Title:	Name and Title:	
Address	Address:	
		-
Name and Title:	Name and Title:	
Address	Address:	

Name and Title:		Name and Title:	
Addres	ss	Address:	
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Azadi Law, P.A.	me regimered agent is.	
Address:	78 SW 7th, St., Suite 500, Miami, FL 33130		
radiess.		-	
		-	
ARTICLE VII	INCORPORATOR		
The name and a	address of the Incorporator is:		
Name:	Calvin Azadi, Esq.		
Address:	78 SW 7th, St., Suite 500, Miami, FL 33130	-	
		-	
ADTICLE 1911	CRECTUE NATE		
Effective date, i	f other than the date of filing:	(OPTIONAL)	
(If an effective filing.)	date is listed, the date must be specific and canno	t be more than five days prior or 90 days after the	
		statutory filing requirements, this date will not be lis	
the document's	effective date on the Department of State's records.		
	med as registered agent to accept service of process for familiar with and accept the appointment as register	or the above stated corporation at the place designated ed agent and agree to act in this capacity	
	Chia (1)	2-10-2020	
	Required Signature/Registered Agent	Date	
	cument and affirm that the facts stated herein are Department of State constitutes a third degrec felony	true. I am aware that the false information submitted as provided for in s.817.155, F.S.	
X To	والمراع مسا	2-10-2020	
Required Signat	ure/Incorporator	Date	