

P21000017696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

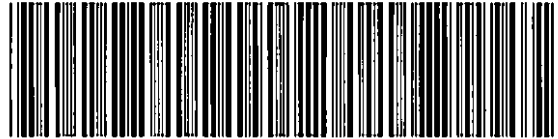
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21 FEB 12 PM 4:44

2021 FEB 25 PM 12:51

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CRABS IN A BUCKET INC

Signature _____

Requested by: SETH

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

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: CRABSIN A BUCKET INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3873 NW 164th St
MIAMI GARDENS, FL 33054

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: For the hospitality industry
in providing food service and all services associated
for food service with respect to the industry and
services rendered therein. Any and all legal
business associated with providing services with
food and all associated.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Allan Orient (V.P.) Name and Title:

Address: 1401 NW 192nd St Address:
MIAMI GARDENS, FL 33169

Name and Title: Anayis Orient (D.) Name and Title:

Address: 3873 NW 164th St Address:
MIAMI GARDENS, FL 33054

Name and Title: FRANCINE ANTONIA PIGATTI (P) CEO Name and Title:

Address: 3873 NW 164th St Address:
MIAMI GARDENS, FL 33054

2021 FEB 25 PM 12:51

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: FRANCINE RAMONA PIGATT
Address: 3873 NW 164th ST
MIAMI GARDENS, FL 33054

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: FRANCINE RAMONA PIGATT
Address: P.O. BOX 693353
MIAMI, FL 33269

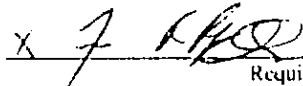
ARTICLE VIII EFFECTIVE DATE:

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  _____ 2/18/2021
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 §817.155, F.S.

X  _____ 2/18/2021
Required Signature/Incorporator Date