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DATE: 4/15/2021

NAME: PARK HOSPITALITY INC

TYPE OF FILING: ARTICLES

COST:

70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE Cibisic Hodge

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

The name of the corporat	ion shall be: PAF	IATIGROH NE	-17Y IN	<u>) c</u>	<u> </u>	
ARTICLE II PRINC	TPAL OFFICE Principal <u>street</u> address 以りんぐつり 入り	<u> </u>	Mailing ad	dress, if different	tis:	
MJANI BE	ACH, FL 33	139				
The purpose for which the	<u>OSE</u> ne corporation is organized	is: To engage	- in ar	y Laws	ا لي	<u>net</u>
of activity	Por which	a conporation	may !	se orge	nize	4
under the	general law o	of the State	of FLOG	RIDA a	<u>vd</u>	
•		e hospitality a	nd ent	eltainmen		
activities				· · · · · · · · · · · · · · · · · · ·		·
				<u></u> :↑	2021	
						;; · :
ARTICLE IV SHARI				PR_15_	,	
The number of shares of	stock is: \0 000			:	PILI	* 3 - •
ARTICLE V INITIA	L OFFICERS AND/OR D	<u>IRECTORS</u>		: :	2:_0.	الماية بيا. الماية بيا. "
Name and Title		Name and	Title:		- -	
Address	•	dent Address:				·
	1050 Washington	ow Ave			<u> </u>	
	Hiami Beach	FL 33189		-	-	
Name and Title:		Name and	Title:			-
Address		Address:			ł	
			: 			
		· /				
Name and Title:		!ame and '	Title:			
Address		Address:		<u> </u>	 	
					-	
					l.	

Name and Title:	Name and Title:
Address	Address:
, 	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT accept	otable) of the registered agent is:
Name: PARA CORP IN CORPO	RATED
Address: 155 OFFICE PLAZA	DR. 1st Floor
TALLAHASSEE - FI	_ 32301
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: MIKAEL COHEN Address: 8701 WILSHIRE F	
Address: 8701 WILSHIRE R	31777
BEVERLY HILLS. C	A 90211
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific an filing.)	. (OPTIONAL) ad cannot be more than five days prior or 90 days after the
<u>Note:</u> If the date inserted in this block does not meet the ap the document's effective date on the Department of State's	oplicable statutory filing requirements, this date will not be listed as records.
Having been named as registered agent to accept service of j certificate, I am familiar with and accept the appointment as	process for the above stated corporation at the place designated in this s registered agent and agree to act in this capacity
See attached.	
Required Signature/Registered Ag	· ·
document to the Department of State constitutes a third degi	rein are true. I am aware that the false information submitted in a ree felony as provided for in s.817.155, F.S.
Ju cont	4-14-2021
Required Signature/Incorporator	Datc

7071 VEN 12 BILLS: 0

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 04/15/2021

ENTITY NAME: PARK HOSPITALITY INC

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated