

P22000048731

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

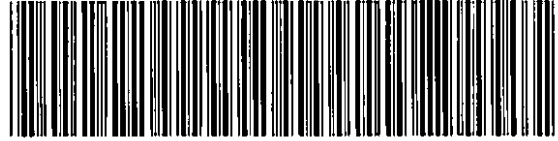
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CAPITAL CONNECTION, INC.

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

SHAKER & PIE OF BOCA RATON, INC.

- ___ 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 _____

Signature _____

Requested by: SETH

06/13/22

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

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: SHAKER & PIE OF BOCA RATON, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

435 PLAZA REAL
BOCA RATON, FL 33432

520 CLEMATIS STREET
WEST PALM BEACH, FL 33401

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

OWN AND OPERATE A FULL-SERVICE RESTAURANT AND BAR

STATE OF FLORIDA
TALLAHASSEE, FL
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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RODNEY MAYO - PRESIDENT Name and Title: VAUGHAN DUGAN - VP

Address: 520 CLEMATIS STREET Address: 136 NW 16TH STREET
WEST PALM BEACH, FL 33401 BOCA RATON, FL 33432

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: THE LAW OFFICE OF PAUL A. KRASKER, P.A.

Address: 1615 FORUM PLACE, 5TH FLOOR
WEST PALM BEACH, FL 33401

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 TALLAHASSEE, FL
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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RODNEY MAYO

Address: 520 CLEMATIS STREET
WEST PALM BEACH, FL 33401


ARTICLE VIII EFFECTIVE DATE:

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

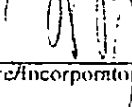
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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 6/13/22 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 6/10/2022 Date