

P23000005401

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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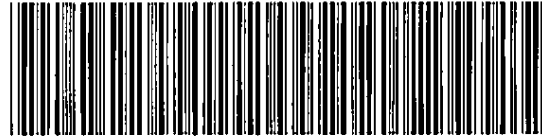
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. CHATHAM
JAN 25 2023

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
JAN 24 PM 3:10

01/24/23--01008--022 **70.00

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2023

2:44

CAPITAL CONNECTION, INC.

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

Red Table Food & Service, Inc

Signature _____

Requested by: SETH

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

124 Ponders Printing • Tallahassee, FL 32301

____ 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 _____
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____ UCC 1 or 3 File _____
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____ Courier _____

COVER LETTER

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

SUBJECT: Red Table Food & Service, Inc
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Tony Martinez
Name (Printed or typed)

2960 Coral Way
Address

Miami, FL 33145
City, State & Zip

786-721-5283
Daytime Telephone number

tony.martinez.0117@gmail.com
E-mail address: (to be used for future annual report notification)

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)

ARTICLE I NAME

The name of the corporation shall be: Red Table Food & Service, Inc

ARTICLE II PRINCIPAL OFFICE

Principal **street** address

Mailing address, if different is:

2960 Coral Way
Miami, FL 33145

2960 Coral Way
Miami, FL 33145

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all laswful business

SEP 21 2011
DIVISION OF CORPORATE REGISTRATION
PH 40113

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tony Martinez, Officer

Name and Title: Emmanuel Jimenez Reyes, Officer

Address 2960 Coral Way

Address: 2960 Coral Way

Miami, FL 33145

Miami, FL 33145

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: CARMAN LAW FIRM, P.A.
Address: 5301 N Federal Hwy, Suite #160,
Boca Raton, FL 33487

RECEIVED
DIVISION OF CORPORATE
AND COMMERCIAL
REGISTRATION
JAN 24 PM 4:10

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Tony Martinez
Address: 2960 Coral Way
Miami, FL 33145

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

DocuSigned by:
Deborah Carman
Required Signature/Registered Agent
1/23/2023
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.

DocuSigned by:
Tony Martinez
Required Signature/Incorporator
1/23/2023
Date