

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000089066 3)))



H230000890663ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : GERALD WEINBERG, P.C.
Account Number : I20030000043
Phone : (800)342-9856
Fax Number : (800)354-3381

2nd request

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

ESCA'S PIZZA CORP II

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$70.00 |

M.A.
2008 APR -7 PM 12:45
TALLAHASSEE FLORIDA

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: ESCA'S PIZZA CORP II

ARTICLE II PRINCIPAL OFFICE

Principal street address

3508 PORTA ROMANO WAY

LAKE MARY, FL 32746

Mailing address, if different is:

3508 PORTA ROMANO WAY.

LAKE MARY, FL 32746

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: FRANCESCA GUIDICI, P

Name and Title: _____

Address 3508 PORTA ROMANO WAY

Address: _____

LAKE MARY, FL 32746

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: FRANCESCA GUIDICI

Address: 3508 PORTA ROMANO WAY

LAKE MARY, FL 32746

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LAWRENCE A. KIRSCH

Address: 41 STATE STREET, SUITE 700

ALBANY, NEW YORK 12207

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

/s/Francesca Guidici
Required Signature/Registered Agent

03/08/2023
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.

Lawrence A. Kirsch
Required Signature/Incorporator

03/08/2023
Date

Apr. 6. 2023 5:02PM

No. 0454 P. 4
P. 1

* * * Communication Result Report (Mar. 8. 2023 1:39PM) * * *

1} GEALD WEINBERG
2}

Date/Time: Mar. 8. 2023 1:38PM

| File | No. Mode | Destination | Pg(s) | Result | Page Not Sent |
|----------------|----------|-------------|-------|--------|---------------|
| 6959 Memory TX | | 18506176381 | P. 3 | OK | |

Reason for error

- | | |
|---------------------------------|---|
| E. 1) Hang up or line fall | E. 2) Busy |
| E. 3) No answer | E. 4) No facsimile connection |
| E. 5) Exceeded max. E-mail size | E. 6) Destination does not support IP-Fax |

1002.100 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000019066 3))



Note: (X) NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (904) 417-5171

From: Account Name : GEALD WEINBERG, P.C.
Account Number : 12001000003
Phone : (202) 543-0054
Fax Number : (800) 354-1301

Enter the email address for this business entity to be used for future annual report filings. Enter only one email address please.

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION
RSCA'S PIZZA CORP II

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$78.00 |

Electronic Filing Menu Corporate Filing Menu Help

2023 APR -7 PM 12:45
TALLAHASSEE FLORIDA