

P240000069381

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.

((H24000373088 3)))



H240003730883ABC2

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****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
UTOPIA 305 BANQUET HALL CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED

2024 NOV -8 PM 4:35

SECRETARY OF STATE
TALLAHASSEE, FL

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 NOV -8 AM 1:57

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:UTOPIA 305 BANQUET HALL CORP.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

19815 SW 88 PLACE
CUTLER BAY, FL 33157**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**JOSE LUIS MARTI - PRESIDENT
NEYZA DIAZ - Vice President**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

JOSE LUIS MARTI
19815 SW 88 PL CUTLER BAY FL 33157**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:JOSE LUIS MARTI
NEYZA DIAZ19815 SW 88 PL CUTLER BAY FL 33157

2024 NOV - 8 AM 10:17

FILED

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

I submit that
the false information
is a third degree felony

EIN: 33 - 186 3731

Required Signatures:

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



Registered Agent

11-8-2024

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.



Incorporator

Stacy King

11-8-2024

Date

FILED

2024 NOV -8 AM 1:56

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA