

P96000088399

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P O Box 6327  
Tallahassee, FL 32314

D.B.A: ROMA ONE(1)

SUBJECT: R.M. INDUSTRIAL, COMPANY ROMA CORPORATION  
(Proposed corporate name - must include suffix)

700001969597  
-10/09/96--01097--014  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Robert J. MAZZA  
Name (Printed or typed)

5432 N.W. 54<sup>th</sup> DR.  
Address

COCONUT CREEK, FL. 33037  
City, State & Zip

954-964-6277  
Daytime Telephone number

TALLAHASSEE, FLORIDA

96 OCT 28 AM 10:04

FILED

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

October 11, 1996

ROBERT J. MAZZA  
5432 NW 54TH DRIVE  
COCONUT CREEK, FL 33037

SUBJECT: R.M. INDUSTRIAL COMPANY D.B.A. ROMA ONE (1)  
Ref. Number: W96000021607

We have received your document for R.M. INDUSTRIAL COMPANY D.B.A. ROMA ONE (1) and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6923.

Doris McDuffie  
Corporate Specialist Supervisor

Letter Number: 296A00046431

## ARTICLES OF INCORPORATION

FILED

95 OCT 28 11:10:04

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be:

~~Roma Industrial Company~~

~~Roma One (C)~~

Roma Industrial  
Corp.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2542 N. STATE Rd 7  
HOLLYWOOD, FLA 33021

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Robert J. MAZZA  
5432 N. W. 54th Ave  
Aventura FLA 33034

Robert J. MAZZA  
2542 STATE Rd 7  
Hollywood FLA 33021

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**


The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

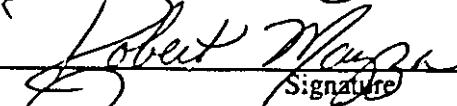
ROBERT J. MAZZA  
5432 N.W. 54<sup>th</sup> DR  
COCONUT CREEK FLA 33037

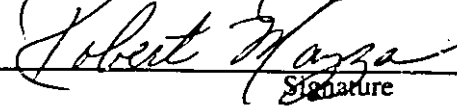
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

7 day of October, 19 96.

(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

FILED

93 OCT 23 11:10:04

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED  
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Roma Corp.  
ROMA Industrial, Corp.  
Old Roma Corp (CO)

2. The name and address of the registered agent and office is:

ROBERT J. MAZZA  
(NAME)  
2542 N. STATE RD 7  
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)  
Hollywood FLA 33021  
(CITY/STATE/ZIP)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Robert Mazza  
(SIGNATURE)

10/7/96  
(DATE)