# Poso000/7135

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				



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Office Use Only

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### TRANSMITTAL LETTER

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

SUBJECT: SARF	NC (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDESURNX)
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00	<b>\$78.75</b>	\$78.75	<b>\$87.50</b>
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
		ADDITIONAL CO	Status PV REQUIRED
		ADDITIONAL CO	TTREQUIRED
FROM: SH	ERRY BAHMAN		
<u>.                                    </u>	Name	(Printed or typed)	
	3787 SARATOGA LANE		<del> </del>
		Address	
	DAVIE, FL, 33328	, State & Zip	
	City	, omic a zip	
	954-629-6307		
		Talenhone number	· · · · · · · · · · · · · · · · · · ·

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

### 2/1/05

Re: Corporate and Fictitious Name Filing

Attn: Cynthia Blalock Division Of Corporations

Please find enclosed documents and payments for the filing of the Corporate Name "SARF Inc" and Fictitious Name "BILLY'S TAVERN". Also enclosed is paid Fed Ex return, any questions please contact us at 954-629-6307.

Thank you very much for your assistance.

Sherry and Frank Bahman

# 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:

SARF INC

# 05 JAN -2 AM 9: 03 SECRETARY UT STATE TALL AHASSEE TE OPIDA

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3787 SARATOGA LANE DAVIE, FL, 33328

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO OPERATE FOR PROFIT COMPANIES

### ARTICLE IV SHARES

The number of shares of stock is: 100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

SHERRY BAHMAN 3787 SARATOGA LANE DAVIE, FL, 33328

**PRESIDENT** 

## ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:

SHERRY BAHMAN 3787 SARATOGA LANE DAVIE, FL, 33328

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SHERRY BAHMAN 3787 SARATOGA LANE DAVIE, FL, 33328

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. Bala.	·	2/1/05
Signature/Registered Agent		Date
S. Bala		2/1/05
Signature/Incorporator	· · ·	Date