

P11000064749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

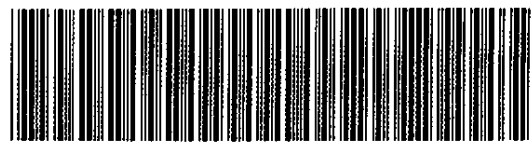
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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COVER LETTER

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

SUBJECT: ABO RABAH BROTHERS 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 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

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

FROM: SAMIR R ISMAIL
Name (Printed or typed)

11410 NW 29 STREET
Address

SUNRISE FL 33323
City, State & Zip

786-879-3092 OR 954-513-0662
Daytime Telephone number

MOHANND_SA@YAHOO.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 ABO RABA7 BROTHERS INC
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address: 11410 NW 29 STREET
SUNRISE FL 33323
Mailing address, if different is: 11410 NW 29 STREET
SUNRISE FL 33323

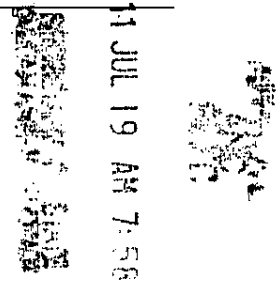
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
Name and Title: SAMIR R ISMAIL Name and Title: _____
Address: 11410 NW 29 STREET Address: _____
SUNRISE FL 33323
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: SAMIR R ISMAI
Address: 11410 NW 29 STREET
SUNRISE FL 33323

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Name: SAMIR R ISMAI
Address: 11410 NW 29 STREET
SUNRISE FL 33323



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

Samir R. Ismail Required Signature/Registered Agent 07/13/11 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.

Samir R. Ismail Required Signature/Incorporator 07/13/11 Date