

P20000001327/4

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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(((H20000006917 3)))



H200000069173ABCZ

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FLORIDA PROFIT/NON PROFIT CORPORATION  
 1009 PETROLEUM INC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$87.50

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**COVER LETTER**

H200000069173

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

**SUBJECT:** 1009 PETROLEUM 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:** MOHAMMAD R. ISLAM

Name (Printed or typed)

1009 N. STATE ROAD 7

Address

ROYAL PALM BEACH, FL 33411

City, State & Zip

561-460-2316

Daytime Telephone number

hossain.motaleb1971@gmail.com

E-mail address: (to be used for future annual report notification)

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

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ARTICLES OF INCORPORATION  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) H200000069173

ARTICLE I NAME  
The name of the corporation shall be: 1009 PETROLEUM INC

ARTICLE II PRINCIPAL OFFICE  
Principal street address Mailing address, if different is:  
1009 N. STATE ROAD 7 1009 N. STATE ROAD 7  
ROYAL PALM BEACH, FL 33411 ROYAL PALM BEACH, FL 33411

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: 1,000 SHARES AT \$1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	MOHAMMAD R. ISLAM - PD	Name and Title:	MOHAMMAD M. RAHMAN- VPDT
Address	3450 BLUE LAKE DR, #202 POMPANO BEACH, FL 33064	Address:	5401 NW 95TH AVE SUNRISE, FL 33351
Name and Title:	MD M. HOSSAIN - VPDS	Name and Title:	
Address	9467 NW 52ND MANOR SUNRISE, FL 33351	Address:	
Name and Title:		Name and Title:	
Address		Address:	

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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: MOHAMMAD R. ISLAM

Address: 3450 BLUE LAKE DR #202  
POMPANO BEACH, FL 33064

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: MOHAMMAD R. ISLAM

Address: 3450 BLUE LAKE DR #202  
POMPANO BEACH, FL 33064

**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*

\*   
 Required Signature/Registered Agent

01/07/2020  
 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.*

\*   
 Required Signature/Incorporator

01/07/2020  
 Date