

P23000017943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

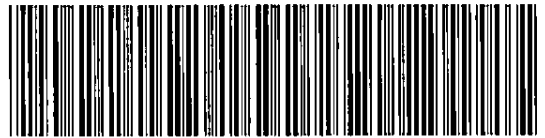
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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3 CHATHAM
MAR - 9 2023

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2023 MAR - 8 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED
2023 MAR - 8 PM 4:04
TALLAHASSEE, FL

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from this account: 120210000160: **87.50**

Authorization Signature: 

Sedra 1 Inc.

BUSINESS NAME **DOCUMENT #**

☒ **Certified Copy of Articles of Organization**

☐ **Certificate of Status**

NEW FILINGS

☐ Profit Corp
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other
☒ **CORP**
☐ **LLLP**

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

☐ APOSTILLE ☐ **Country**

AMMENDMENTS

☐ Amendment
☐ Resignation of R.A. Officer/Director
☐ Change of Registered Agent
☐ Dissolution
☐ Merger
☐ Conversion
☐ Amended and restated Articles
☐ **Statement of Authority**

REGISTRATION/QUALIFICATIONS

☐ Foreign filing
☐ Limited Partnership
☐ Reinstatement

☐ Other

EXAMINER'S INITIALS: _____

COVER LETTER

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

SUBJECT: Sedra 1 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

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

FROM: Brett Isaac
Name (Printed or typed)
2151 University Blvd S
Address
Jacksonville, FL 32216
City, State & Zip
904-730-9264
Daytime Telephone number
Brett@isaactaxcpa.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

The name of the corporation shall be: Sedra 1 Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

4429 Blanding Blvd

Mailing address, if different is:

Jacksonville, FL 32210

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To Operate a convenience Store.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Louai Khashouf-President

Name and Title: _____

Address 12088 Mandrake Woods ct

Address: _____

Jacksonville, FL 32223

Name and Title: Wisam Mhessin_ Vice President

Name and Title: _____

Address 12088 Mandrake Woods ct

Address: _____

Jacksonville, FL 32223

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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TALLAHASSEE, FL

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: Louai Khashouf
12088 Mandrake Woods ct
Address: Jacksonville, FL 32223

ARTICLE VII INCORPORATOR

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

Name: Brett Isaac
Address: 2151 University Blvd S
Jacksonville, FL 32216

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TALLAHASSEE, FL

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 03/07/2023 (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
Date 3/7/23

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
Date 3/7/23