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(Requestor's Name)
(Address)
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(Address)
, ,
(City/State/Zip/Phone #)
(Sity/State/Zip/r Horie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Consideration As Ellis Office
Special Instructions to Filing Officer:
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Office Use Only



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10/06/08--01027--026 **87.50

COVER LETTER

* TO: New Filing Section Division of Corporations	
SUBJECT: <u>Moeini</u>	Corporation - must include suffix)
(Name of corporation	- must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for A "Certificate of Existence," and check are submitted to re transact business in Florida.	
Please return all correspondence concerning this matter	o the following:
Mehdi Mame of Moein. Corpo	pein.
(Name of	Person)
Moein. Corpo	pration
(Firm/Con	npany)
28905 Hwy	98 - 36526 nd Zip code)
(Addre	ss)
Daphne, Al	., 36526
(City/State as	nd Zip code)
For further information concerning this matter, please ca	
Meholi Moeini at (251 (Name of Person) (Area C	644-3090
(Name of Person) (Area C	ode & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327
Tallahassee, FL 32301	Tallahassee, FL 32314
Enclosed is a check for the following amount:	· · · · · · · · · · · · · · · · · · ·
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING A REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF I	
1. Moein: Corporation; must include "INCORPORATED," "COMPANY," "CORPORATIO" "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ON,"
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transact 2. Alabama 3. 20.515 a	ing business in Florida)
(State or country under the law of which it is incorporated) (FEI number, if ap	` ,
(Date of incorporation) (Duration: Year corp. will cease	
6(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	ility)
7. 28905 Hwy 98 Daphne, AL (Principal office address)	36526
(Current mailing address)	THOP
8. Restaurant (taking over two experiments) of corporation authorized in home state or country to be carried out in state of F	
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: DWAYNE SALTER	T-6 P
Office Address: 2100 Reservation Rd. Gulf Breeze, Florida 32563	OF STATE
(City), Florida 32563 (Zip code)	ŪF O
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above state designated in this application, I hereby accept the appointment as registered agent and agi further agree to comply with the provisions of all statutes relative to the proper and comple and I am familiar with and accept the obligations of my position as registered agent.	ree to act in this capacity. I
Onane Salta (Registered agent's signature)	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:	11 -
Ä. DIRECTORS	ILED
	FLORIDA
Address: 28905 Hm 98	'Y OF STA
Dachne, AL 36526	C. FLORIDA
Chairman: Mehd. Moein. Address: 28905 Hwy 98 Daphne, AL 36526 Vice Chairman: Mehdi Moeini	
Address:	
Director: U Sunu	
Address:	18.418
Director:	
Address:	
B. OFFICERS	
President: Mehdi Macini	
Address:	
Vice President:	
Address:	
Rome	
Secretary: Address: Treasurer: Secure Secure	
Address:	
Treasurer: Seure	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or direction listing additional officers and listi	ectors.
13. elleful Illa	
(Signature of Director or Officer listed in number 12 of the application)	
14. Mehd. Moe.n. CEO (Typed or printed name and capacity of person signing application)	
(Typed of printed name and capacity of person signing apprication)	

Beth Chapman Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that Moeini Corporation incorporated in Baldwin County, Daphne, Alabama on June 30, 2006. I further certify that the records do not disclose that said Moeini Corporation has been dissolved.

08 OCT -6 AM 8: 20
SECRETARY OF STATE



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

July 14, 2008

Date

Beth Chapman

Beth Chapman

Secretary of State