

**N05000003756**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

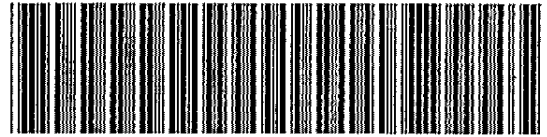
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**500049899065**

114/07/05--01041--016 \*\*87.50

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
05 APR - 7 PM 2:35

TRANSMITTAL LETTER

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

SUBJECT: NATION OF ISLAM  
N.O.I. 7TH REGION PRISON REFORM, INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: ANWAR AARIF  
Name (Printed or typed)

5126 N. HABANA APT. 109  
Address

TAMPA, FL 33614  
City, State & Zip

(813) 235-5551  
Daytime Telephone number

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 APR - 7 PM 2:35

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

# ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

## ARTICLE I NAME

The name of the corporation shall be:

~~N.O.I.F.~~ HA REGION PRISON REFORM, INC.  
NATION OF ISLAM

## ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5126 N. HABANA APT. 109  
TAMPA, FL 33614

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MINISTER TO ALL INMATES IN THE LOCAL COUNTY JAILS,  
STATE PRISONS, AND FEDERAL PRISONS IN THE REGION  
(STATE OF FLORIDA)

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

APPOINTED BY VOTE  
AT THE ANNUAL MEETING.

## ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

ANWAR AARIF, DIRECTOR  
5126 N. HABANA APT. 109  
TAMPA, FL 33614

RICHARD MUHAMMAD, DIRECTOR  
28700 FALLING LEAVES WAY  
WESLEY CHAPEL, FL 33543

## ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

RICHARD MUHAMMAD  
28700 FALLING LEAVES WAY  
WESLEY CHAPEL, FL 33543

## ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

ANWAR AARIF  
5126 N. HABANA APT. 109  
TAMPA, FL 33614

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 APR -7 PM 2:35

\*\*\*\*\*

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.

  
Signature/Registered Agent

4/4/05  
Date

  
Signature/Incorporator

4-4-05  
Date