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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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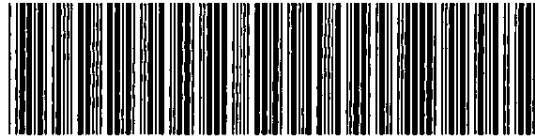
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: AMERICAN MUSLIM ALLIANCE OF FLORIDA 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: MOHAMMED OSMAN CHOWDHURY
Name (Printed or typed)

9 SEAFORD PLACE
Address

BOYNTON BEACH, FL - 33426
City, State & Zip

561-523-0922(CELL), 561-966-6256(RES)
Daytime Telephone number

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

ARTICLES OF INCORPORATION

The under signed incorporator, for the purpose of forming a Florida non-profit corporation, Hereby adopts the following Articles of Incorporation.

ARTICLE - I

The name of the Corporation is: AMERICAN MUSLIM ALLIANCE OF FLORIDA

ARTICLE - II

The principal business address of the corporation:

9 Seaford Place, Boynton Beach, FL - 33426

The mailing address of the corporation is: **9 Seaford Place, Boynton Beach, FL - 33426**

ARTICLE - III

The specific purpose of the corporation is: (This is also the Mission Statement)
To organize specifically Muslims and non-Muslims who believe in God to cultivate Understanding and friendship based on common beliefs and values; to promote dialogue of Understanding, peace and harmony amongst Muslim and non-Muslim communities in the United States of America; to learn each others beliefs and values and to find ways to respect each other; To remove hatred and fear and misconceptions created; To provide social, moral and intellectual support to Muslims and non-Muslims; To provide physical support and help in case of man made or natural disaster and emergency circumstances; To provide charitable distribution for the needy and helpless; To work towards building a strong United States of America in the process of above accomplishment of goals; To work towards racial integration and harmony of Muslims and non-Muslims in the United States of America.

ARTICLE - IV

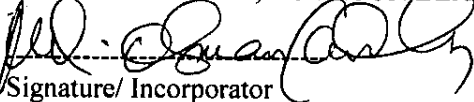
The manner in which directors are elected and appointed is:

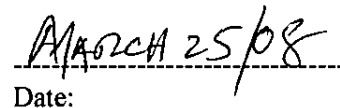
Appointed by incorporator, registered agent and officers of the corporation. The corporation is incorporated as a non-member.

ARTICLE - V

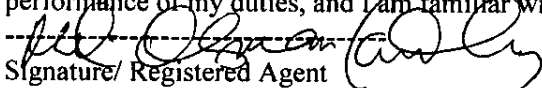
The name and Florida Street address of the registered agent is:

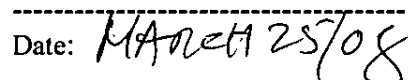
MOHAMMED OSMAN CHOWDHURY
9 SEAFORD PLACE, BOYNTON BEACH, FL - 33426


Signature/ Incorporator


Date:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Signature/ Registered Agent


Date:

Officer/ Director Name and address:

NAME AND ADDRESS # 1

TITLE
NAME (LAST, FIRST, MIDDLE, TITLE)
STREET ADDRESS
CITY, STATE, ZIP CODE & COUNTRY

P
CHOWDHURY, MOHAMMED OSMAN
9 SEAFORD PLACE
BOYNTON BEACH, FL-33426, USA

NAME AND ADDRESS # 2

TITLE
NAME (LAST, FIRST, MIDDLE, TITLE)
STREET ADDRESS
CITY, STATE, ZIP CODE & COUNTRY

VP
ISMAIL, REZWAN
1669 HAWTHORNE PLACE
WELLINGTON, FL-33414, USA

NAME AND ADDRESS # 3

TITLE
NAME (LAST, FIRST, MIDDLE, TITLE)
STREET ADDRESS
CITY, STATE, ZIP CODE & COUNTRY

VP
BHUIYAN, ABUL BASHER
9997 SAGO POINT DRIVE
LARGO, FL-33777, USA

NAME AND ADDRESS # 4

TITLE
NAME (LAST, FIRST, MIDDLE, TITLE)
STREET ADDRESS
CITY, STATE, ZIP CODE & COUNTRY

GENERAL SECRETARY
MAHMUD, AZHAR
1068 GROVE PARK CIRCLE
BOYNTON BEACH, FL-33436, USA

NAME AND ADDRESS # 5

TITLE
NAME (LAST, FIRST, MIDDLE, TITLE)
STREET ADDRESS
CITY, STATE, ZIP CODE & COUNTRY

ASSISTANT GENERAL SECRETARY
CHOWDHURY, AKHTER UDDIN
361 BROWERD AVE
GREENACRES, FL-33463, USA

NAME AND ADDRESS # 6

TITLE
NAME (LAST, FIRST, MIDDLE, TITLE)
STREET ADDRESS
CITY, STATE, ZIP CODE & COUNTRY

TREASURER
UDDIN, MOHAMMED JAMAL
5131 ELPINE WAY
PALM BEACH GARDEN, FL-33418, USA

NAME AND ADDRESS # 7

TITLE
NAME (LAST, FIRST, MIDDLE, TITLE)
STREET ADDRESS
CITY, STATE, ZIP CODE & COUNTRY

ASSISTANT TREASURER
SIDDIQUI, KAMRAN
5600 DRYDEN ROAD
WEST PALM BEACH, FL-33415, USA