(Address)  (Address)	800132023148	
(City/State/Zip/Phone #)	07/02/0801025005 **78,75	
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status		
Special Instructions to Filing Officer:  Heta Mulacave ALITHORIZAVONE FORMETO CORRECT LAULE TO DATE 7/3/68 DOC 2000 MRD	OR JUL -2 PH 12:  SECRE LARY OF ST ALLAHASSEE, FLO	

Office Use Only

# **COVER LETTER**

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

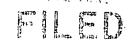
SUBJECT: The Green	ı Mail Movement Corn		
	(PROPOSED CORPORATION	,	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate
FROM:	The Green Mall Movement Co Name (Prin	orp. nted or typed)	_
	933 Savannah Falls Dr Ad	ldress	-
	Weston, FI 33327 City, Si	tate & Zip	-
	954-854-0326		

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

Daytime Telephone number

## ARTICLES OF INCORPORATION

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



#### ARTICLE I NAME

The name of the corporation shall be:

The Green Mall Movement Corp.

08 JUL -2 PM 12: 54

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 933 Savannah Falls Dr Weston, FI 33327

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Said corporation is organized exclusively for charitable, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

## ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The manner in which the directors are elected or appointed is as follows: Directors shall be elected by a majority vote of the existing board of directors.

#### INITIAL DIRECTORS AND/OR OFFICERS

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

पाद <sup>((tute(s):</sup> Director Tara Jafarmadar (Co-President) Hector D. Muiica (Co-President)

Director Sarvin Khorram (Vice-President)

933 Savannah Falls Dr

737 N. Southlake Dr.

15004 SW 50 CT

Weston, FI 33327

Hollywood, FI 33019

Davie, FI 33331

#### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Tara Jafarmadar 737 N. Southlake Dr Hollywood, FI 33019

#### ARTICLE VII INCORPORATOR

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

Tara Jafarmadar 737 N. Southlake Dr Hollywood, FI 33019

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 Signature/Incorporator