## N17000005493

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FELLAHASSEE, FLORIDA

617-034370

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April 21, 2017

ROBERT TYLER 3300 S.W. 129 LOOP OCALA, FL 34473

SUBJECT: MECCA (MUSLIM ENGAGED IN COMMUNITY AND CIVIC

ACTIVITIES), INC.

Ref. Number: W17000034370

We have received your document for MECCA (MUSLIM ENGAGED IN COMMUNITY AND CIVIC ACTIVITIES), INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L01000001982.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

www.sunbiz.org

Letter Number: 317A00007769

Division of Comparations DO POV 6227 Tallahagaaa Florida 22214

## **COVER LETTER**

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

SUBJECT:	(PROPOSED CORP	O, Inc., Orate name Must inc	CLUDE SUFFIX)	
REP.#	". W 17000034?	370		
Enclosed is an original ar	nd one (1) copy of the Ar	ticles of Incorporation and	a check for:	1 .
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate	fel already paid see attached
		ADDITIONAL CO	PY REQUIRED	<u>.</u>

FROM: Robert Tyler

Name (Printed or typed)

3300 SW 129Th Loop

Address

Ocala, FL 34473

City, State & Zip

352-318-1506

Daytime Telephone number

muraphat @gmail.com (Pres.)

Uzomah@gmail.com (Pres.)

Uzomah@gmail.com (Pres.)

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 617, F.S., (Not for Profit) The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE Mailing address, if different is: Principal street address: ထ္ 3300 SW 12971 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Organized to promote positive engagement Muslims and the Islamic religion through peacemmunity-supportive efforts that to put Islamic principles into practice through programs at promote good charater and to bring about a community and country; promoting healty American Values The manner in which the directors are elected and appointed: Her the in tist ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Tyler President Name and Title: Khadijah U. Bilal, Secretary 2607 NE 56 Terrace 300 SW 129 LOOP \_ Address: Address Gamesville FL 32609 Ocala, FL 34473 C. Russell, Vice Fra, Name and Title: Sherri Tyler, SW Archer Road Address: Address Jamesville, FL 32608 reasurer Name and Title: Name and Title: tamela Address: Address Jamesville, FL32601

Name and Title:	,	Name and Title:		
Address		Address:		
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Name and Title:		Name and Title:		
Address		Address:	<b>.</b>	
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Antici C I/I DECIS	TEREN ACIENT			
	TERED AGENT treet address (P.O. Box NOT acce	eptable) of the registered agent is:		
Name: R	obert TYLER			
Address: 3	300 SW 1297 LOOP	····		
<u></u>	Cala, FL 3447	3	Par	17.
	, 		2 % EC	Ý MAY
The name and address of			مار بن الاربي الاربي	Fil.
Name:	Thadijah U.Bi	<u>a</u>	<u> </u>	<b>₹</b>
Address:	2607 NE 567 TE	mace	25 Z	8: 39
	Samesville, FL	32609		ق
ARTICLE VIII EFFE	CCTIVE DATE:	(ODTIONAL)		
(If an effective date is i	isted, the date must be specific a	. (OPTIONAL) nd cannot be more than five days prior	r or 90 days after th	e filing.)
Nata IStha data inconta	d in this block does not most the a	pplicable statutory filing requirements, th	nie date will not he li	etect as the
document's effective dat	te on the Department of State's rec	ords.	iis date wit not be ii.	sted as the
Having been named as certificate, I am familian	registered agent to accept service with and accept the appointment	of process for the above stated corpora as registered agent and agree to act in the	ition at the place des is capacity	signated in this
Popert Tyle	Required Signature of Registered		05/12/17	
			Date	
	and affirm that the facts stated her ite constitutes a third degree felony	ein are true. I am aware that any false in as provided for in s.817.155, F.S.	iformution submitted	l in a document
Though	M. Bilau Required Signature of Inco		06/12/20	17
	Required Signature of Inco	rporator	l Date	