

# N18000010987

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

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

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

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

☐ PICK-UP    ☐ WAIT    ☐ MAIL

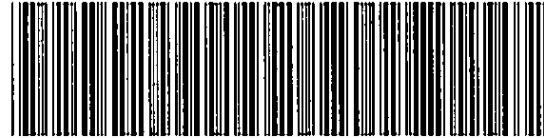
\_\_\_\_\_  
(Business Entity Name)

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

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

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FILED  
2018 OCT 17 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FL 32310

N CULLIGAN

OCT 19 2018

October 10, 2018

Florida Dept. of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Dear Sir/Madam,

Please file the attached Articles of Incorporation for the Islamic Center of St. John's County, Inc. and return to us a certified copy as well as a Certificate of Status.

A check of \$87.50 covering the fees for the said services is attached.

Sincerely,

A handwritten signature in black ink, appearing to read "Riaz Ahmed". The signature is fluid and cursive, with the first name "Riaz" and last name "Ahmed" clearly distinguishable.

Riaz Ahmed, MD  
101 Marketside Ave.  
Suite 404-165  
Ponte Vedra, FL 32081

ARTICLES OF INCORPORATION  
In compliance with Chapter 617, F.S., (Not for Profit)

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ARTICLE-I NAME

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The name of the corporation shall be: Islamic Center of St. John's County, Inc.

ARTICLE-II PRINCIPAL OFFICE

101 Marketside Ave.  
Suite 404-165  
Ponte Vedra, FL 32081

ARTICLE-III PURPOSE

The organization is organized exclusively for charitable, religious, educational, and scientific purposes under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

ARTICLE-IV DISSOLUTION

Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

ARTICLE-V MANNER OF ELECTION

The organization is managed by a Board of Directors elected by Members of the organization.

ARTICLE-VI INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Riaz Ahmed, MD, President  
Address: 101 Marketside Ave.  
Suite 404-165  
Ponte Vedra, FL 32081

Name and Title: Nausheen Ashraf, Secretary  
Address: 108 Perdido Key Court  
Ponte Vedra, FL 32081

Name and Title: Amina Badar, Treasurer  
Address: 645 Port Charlotte Drive  
Ponte Vedra, FL 32081

ARTICLE-VII REGISTERED AGENT

Riaz Ahmed, MD  
101 Marketside Ave.  
Suite 404-165  
Ponte Vedra, FL 32081

ARTICLE-VIII INCORPORATOR

Riaz Ahmed, MD  
101 Marketside Ave.  
Suite 404-165  
Ponte Vedra, FL 32081

ARTICLE-IX EFFECTIVE DATE

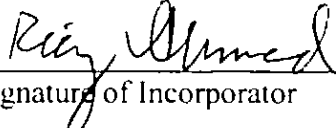
October 10, 2018

*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 of Registered Agent

10-12-18  
Date:

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
\_\_\_\_\_  
Signature of Incorporator

10-12-18  
Date:

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SECRETARY OF STATE  
TALLAHASSEE, FL 32304