

N 2200000 2668

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

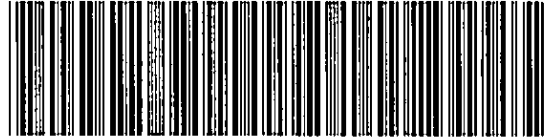
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W/2200000 9967

Office Use Only



400379598364

2-28-22

FILED
2022 FEB 28 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FL

✓

COVER LETTER

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

SUBJECT: Diabetes and Hypertension Awareness Foundation (DHAF) 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: Aktar Jaman

Name (Printed or typed)

14543 Velleux Drive

Address

Orlando, FL 32837

City, State & Zip

850-723-7575

Daytime Telephone number

aktarjaman@hotmail.com

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)

ARTICLE I NAME

The name of the corporation shall be: DIABETES AND HYPERTENSION AWARENESS FOUNDATION INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:
14543 VELLEUX DRIVE
ORLANDO, FL 32837

Mailing address, if different is:
same as principal address

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To promote education and charitable activities, healthcare awareness in the
community and other people at large. To organize socio-cultural activities, encouraging active involvement in philanthropic
activities locally and abroad.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed

as provided for in the by-laws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: AKTAR JAMAN, PRESIDENT

Address: 14543 VELLEUX DRIVE
ORLANDO, FL 32837

Name and Title: ANIKAH HOSSAIN, VP

Address: 14543 VELLEUX DRIVE
ORLANDO, FL 32837

Name and Title: ASAHI HOSSAIN, VP

Address: 14543 VELLEUX DRIVE
ORLANDO, FL 32837

Name and Title: MOHAMMAD MONRUZZAMAN, VP

Address: HOUSE 33, ROAD 14, SECTOR 12
UTTARA, DHAKA-1230
BANGLADESH

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

2022 FEB 28 AM 10:19
FILED
SECRETARY OF STATE
TALLAHASSEE, FL

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: AKTAR JAMAN

Address: 14543 VELLEUX DRIVE

ORLANDO, FL 32837

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: AKTAR JAMAN

Address: 14543 VELLEUX DRIVE

ORLANDO, FL 32837

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/10/2022. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

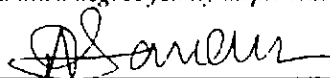


Required Signature of Registered Agent

02/18/2022

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.



Required Signature of Incorporator

02/18/2022

Date