

P000000078190
TRANSMITTAL LETTER

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

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-09/01/00--01030--002
*****78.75 *****78.75

SUBJECT: RASS GLOBAL, 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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: MOHAMMAD P. HANIF
Name (Printed or typed)
845 N. E. 79th St.
Address
MIAMI, FL 33138
City, State & Zip
(305)-751-0160
Daytime Telephone number

00 SEP - 1 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

ay 9/1

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

RASS GLOBAL, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

845 N. E. 79th St.
Miami, FL 33138

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

FIVE HUNDRED SHARES (500) AT ONE DOLLAR (\$1.00) PAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

MOHAMMAD P. HANIF
845 N. E. 79th St.
Miami, FL 33138

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

MOHAMMAD P. HANIF
845 N. E. 79th St.
Miami, FL 33138

x


Signature/Incorporator

AUGUST 29, 2000

Date

(An additional article must be added if an effective date is requested.)

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

x


Signature/Registered Agent

AUGUST 29, 2000

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA