

91321
TRANSMITTAL LETTER

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

FILED
00 SEP 25 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: ST. MENA CAFE, INC.
(Proposed corporate name - must include suffix)

900003403769--8
-09/25/00--01152--008
*****78.75 *****78.75

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: GAMEL BEKHIT
Name (Printed or typed)

5273 EHRLICH ROAD
Address

TAMPA, FL 33624
City, State & Zip

(813) 926-0310
Daytime Telephone number

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

9-27
WOC

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:

ST. MENA CAFE, INC.

ARTICLE II PRINCIPAL OFFICE

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

5273 EHRLICH ROAD
TAMPA, FL 33624

ARTICLE III SHARES

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

200 SHARES NO PAR VALUE.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

GAMEL BEKHIT
5273 EHRLICH ROAD
TAMPA, FL 33624

ARTICLE V INCORPORATOR

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

GAMEL BEKHIT - President
5273 EHRLICH ROAD
TAMPA, FL 33624



Signature/Incorporator

9/18/00

Date

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

EFFECTIVE DATE 09/15/2000

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



Signature/Registered Agent

9/18/00

Date

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