

PO1000081064

TRANSMITTAL LETTER

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

SUBJECT: Alex Malik, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

400004530464--5  
-08/13/01--01081--006  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Enclosed are 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 of Status

ADDITIONAL COPY REQUIRED

FROM: Adell Michael Pickens  
Name (Printed or typed)

18118 Villa Creek DR  
Address

Tampa, FL 33647  
City, State & Zip

813-932-2046  
Daytime Telephone number

FILED  
01 AUG 13 AM 7:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

8-17-01  
WCE

## Articles of Incorporation

The undersigned, being of the age 18 or older, files these articles of incorporation pursuant to Chapter 607 and/or 621, F.S. (Profit)

### Article I Name

Alex Malik, Inc.

### Article II Period of Duration

12/31/2041

### Article III Principal Office

18118 Villa Creek Dr  
Tampa, FL 33647

### Article IV Purpose

The purpose for which the corporation is organized is for the transaction of any and/or all lawful business for which corporations may be organized under the Florida Statutes.

### Article V Shares

The number of shares of stock is: 1500  
Par Value: \$0.00

### Article VI Initial Officer/Directors

Adell Michael Pickens  
18118 Villa Creek Dr.  
Tampa, FL 33647 (Located in County of Hillsborough)  
Chief Executive Officer

### Article VII Registered Agent

Adell Michael Pickens  
18118 Villa Creek Dr.  
Tampa, FL 33647 (Located in County of Hillsborough)

### Article VIII Incorporator

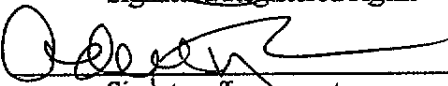
Adell Michael Pickens  
18118 Villa Creek Dr.  
Tampa, FL 33647

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TALLAHASSEE, FLORIDA

.....  
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/Registered Agent

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date