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(Re	equestor's Name)	
(Ac	ldress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

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## TRANSMITTAL LETTER

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

SUBJECT:	(PROPOSED CORPORATI	EN E	ESUFFIX)
Enclosed is an origi	nal and one(1) copy of the artic	eles of incorporation and	a check for :
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED
	Ru Bin A	FROM:  FAROCC  Printed or typed)	₹ ″
	1143/ Bfo Port Ri	Address  Chey Ff	3468
	727-80 Daytime 1	09 <u>3</u> 358	

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621	, F.S. (Profit)	•
ARTICLE I NAME  The name of the corporation shall be:	 	· · · · · ·
RUBINAENTER PRISE	THC	
The principal place of business/mailing address is:  280   Guftoth Bay (R760)  Clear Walter of 33759  ARTICLE III PURPOSE  The purpose for which the corporation is organized in PROFITABLE BUSINES  ARTICLE IV SHARES  The number of shares of stock is:	_	FILED  O3 APR -2 PM 1:  SECRETARY OF ST TALLAHASSEE, FLC
ARTICLE V INITIAL OFFICERS/DIRECT The name(s), address(es) and title(s):	TORS (optional)	PATE JRID'S
FUBINA FAROOD  COUNER  11431 Ftony Brook Path  fort fichey Ff 3466 F  ARTICLE VI REGISTERED AGENT		
The name and Florida street address of the register	ed agent is:	
Rubin Far ood Path 11431 Stony Brook Path Port. Richey fl. 346 ARTICLE VII INCORPORATOR	.T	
The name and address of the Incorporator is:		1
Direct FATOO	= 0 01.110	•
11431 story Brook Path fort Rich	of of 34668	
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Signature/Incorporator/ negistered Agent

Date