

PO3000077217

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

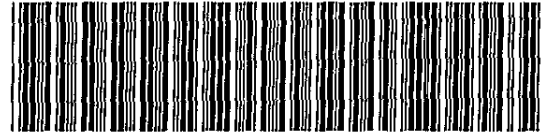
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900021359799

07/10/03--01023--005 \*\*78.75

FILED  
03 JUL 10 AM 10:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W-19541

me 7/15

## TRANSMITTAL LETTER

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

SUBJECT: \_\_\_\_\_

SAFAR HOTELS, INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: \_\_\_\_\_

Julian Mazili

Name (Printed or typed)

9204 Knights Branch St

Address

Tampa, FL 33637

City, State & Zip

813-299-7045

Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

03 JUL 10 AM 10:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

SAFAR HOTELS, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

9204 KNIGHTS BRANCH ST  
TAMPA, FL 33637

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Hotel Brand Membership

**ARTICLE IV SHARES**

The number of shares of stock is:

1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

JULIAN MAZILI  
President  
9204 KNIGHTS BRANCH ST  
TAMPA, FL 33637

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

JULIAN MAZILI  
9204 KNIGHTS Branch St  
Tampa, FL 33637

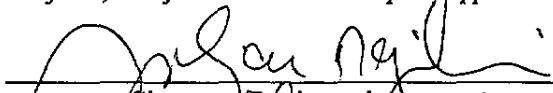
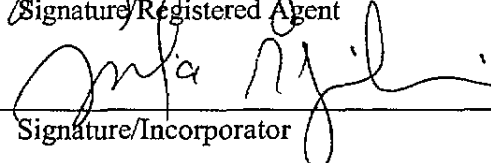
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JULIAN MAZILI  
9204 KNIGHTS Branch St  
Tampa, FL 33637

\*\*\*\*\*

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

7/8/03  
\_\_\_\_\_  
Date  
7/8/03  
\_\_\_\_\_  
Date