

PD5000013817

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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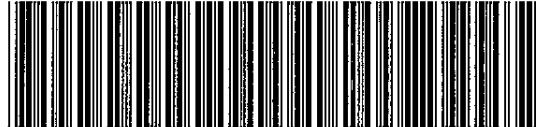
(Business Entity Name)

(Document Number)

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STATE
DIVISION
TALLAHASSEE, FLORIDA

STATE
DIVISION
TALLAHASSEE, FLORIDA

05 JAN 27 PM 11:03

05 JAN 27 AM 10:50

FILED

RECEIVED

TRANSMITTAL LETTER

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

SUBJECT: ADDIS MART 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: MINYESNOT HAILEMARIAM
Name (Printed or typed)

4784 CAPITAL CIRCLE SW
Address

TALLAHASSEE FL 32305
City, State & Zip

850 042 0147
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)

ARTICLE I NAME

The name of the corporation shall be:

ADDIS MART INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4784 CAPITAL CIRCLE SW
TALLAHASSEE FL 32305

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONVINIENT STORE

ARTICLE IV SHARES

The number of shares of stock is:

TWO (2)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MOHAMMED MUHABA (President)
MINTESNOT HILEMARIAM (president)
4784 CAPITAL CIRCLE SW
TALLAHASSEE FL 32305

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

MINTESNOT HALEMARIAM
4784 CAPITAL CIRCLE SW
TALLAHASSEE FL 32305

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MOHAMMED MUHABA L
4784 CAPITAL CIRCLE SW
TALLAHASSEE FI 32305

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

Muhaba Lallo

Signature/Registered Agent

Mintesnot

Signature/Incorporator

FILED

05 JAN 27 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/27/05

Date

1/27/05

Date