

P05000087356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

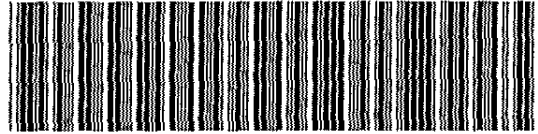
(Document Number)

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05 JUN 17 PM 3:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7. Burch 11/11/11

## TRANSMITTAL LETTER

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

SUBJECT: Kosher Coupons 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: Yehiel Toledano  
Name (Printed or typed)

20533 Biscayne Blvd #162  
Address

Aventura FL 33180  
City, State & Zip

786-223-2448  
Daytime Telephone number

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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:

Kosher coupons inc

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

20533 BISCAYNE BLVD # 162  
Aventura, FL 33180

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ADVERTISING ~~FOR~~ COMPANY

### ARTICLE IV SHARES

The number of shares of stock is:

50

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

N/A

### ARTICLE VI REGISTERED AGENT

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

Yehiel Toledano  
3300 NE 192 St # 1608  
Aventura, FL 33180

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Yehiel Toledano  
3300 NE 192 St # 1608  
Aventura, FL 33180

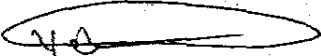
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

Date



Signature/Incorporator

Date