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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

·			
SUBJECT: SALI	EM WHOLESALE INC		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti-	cles of incorporation and	a check for:
□ 65 0.00	[]***		<u>г</u>
☐ \$70.00	√ \$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED
		L	
FROM: M	OHAMMAD SALEM	•	
		(Printed or typed)	
	1404 PROVIDENCE RD		
		Address	
	•	1001033	
	LAKELAND FL 33805-3454	1	
	City,	State & Zip	
	863-513-4067		
		elenkone 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:

SALEM WHOLESALE INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1404 PROVIDENCE RD LAKELAND FL 33805-3454

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MOHAMMAD SALEM CEO 1404 PROVIDENCE RD LAKELAND FL 33805-3454

ARTICLE VI _ REGISTERED AGENT

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

MOHAMMAD SALEM 1404 PROVIDENCE RD LAKELAND FL 33805-3454

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

WILLIAM R THORNHILL 905 AVE T SE WINTER HAVEN FL 33880-4620

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

mehing the same of	02/12/207
Signature/Registered Agent	Date
million of Thomas	02/12/2007
Signature/Incorporator	Date

SECRETARY OF STATE.