

PD7000039409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

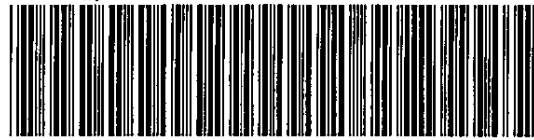
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/28/07--01015--003 **105.00

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07 MAR 28 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE MAR 30 2007

COVER LETTER

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

SUBJECT: CAFE EILAT, 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

PLUS 2 additional
certified copies @ 8.75 ea

ADDITIONAL COPY REQUIRED

\$105.00

FROM: MOSHE ARIEL
Name (Printed or typed)

22217 HOLLYHOCK TRAIL
Address

BOCA RATON, FLORIDA 33433
City, State & Zip

561-544-1107
Daytime Telephone number

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

1-3-0-2

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:

CAFE EILAT, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

22217 HOLLYHOCK TRAIL
BOCA RATON, FL 33433

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 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MICHAEL AHARON - PRESIDENT
MOSHE ARIEL - VICE PRESIDENT
SHILO HASSAN - VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

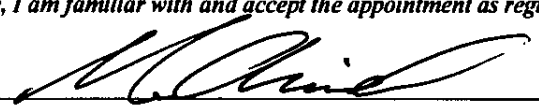
MOSHE ARIEL
22217 HOLLYHOCK TRAIL
BOCA RATON, FL. 33433

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MOSHE ARIEL
22217 HOLLYHOCK TRAIL
BOCA RATON, FL. 33433

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