

P08000075569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP



WAIT

MAIL

(Business Entity Name)

(Document Number)

Certified Copies

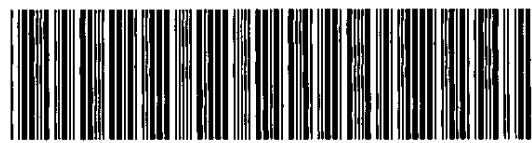
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Certificates of Status

Special Instructions to Filing Officer:

78.75

Office Use Only



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08/14/08--01003--007 \*\*113.75

RECEIVED

FILED

08 AUG 13 PM 4: 00

08 AUG 13 PM 4: 09

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CJ 8/13

## COVER LETTER

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

**SUBJECT:** \_\_\_\_\_  
(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      & Certificate of  
                  Status      Status

**ADDITIONAL COPY REQUIRED**

FROM: The Hooka nite cake Inc

Name (Printed or typed)

5560 cypress Tree ct  
Address

Palm Beach Rader St 33418  
City, State & Zip

561 248 3254  
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:

The Hooka nite Cafe Inc

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08 AUG 13 PM 4:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5560 Cypress Tree Cr  
Palm Beach Academy Fl 33418

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Profit

## 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):

OMAR NAJJAR President  
5560 Cypress Tree Cr  
Palm Beach Fl 33418

## ARTICLE VI REGISTERED AGENT

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

OMAR NAJJAR

5560 Cypress Tree Cr  
Palm Beach Fl 33418

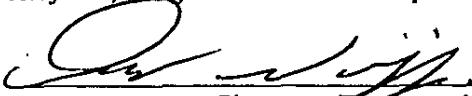
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

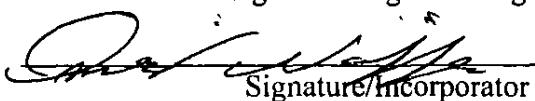
OMAR NAJJAR

5560 Cypress Tree Cr  
Palm Beach Fl 33418

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

8/13/08

Date

8/13/08

Date