

PO9000052935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Edward Flakman

AUTHORIZATION BY PHONE TO ~~NAME~~

CORRECT ~~DATE~~ ADDITIONAL OFFICER IN

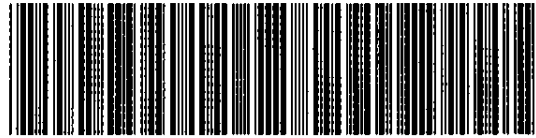
DATE 6/18/09

DOC. EXAM

MRS

Article IV

Office Use Only



900156373429

06/15/09--01039--005 **70.00

FILED

09 JUN 15 PM 12:14

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
6/18

COVER LETTER

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

SUBJECT: BARKAN INVESTMENTS 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: EDWARD FLAXMAN
Name (Printed or typed)

10730 SW WATERWAY LANE
Address

PORT ST LUCIE, FL. 34987
City, State & Zip

772-342-8459
Daytime Telephone number

FLAXMANE@HTCPLUS.NET
E-mail address: (to be used for future annual report notification)

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: BARKAN INVESTMENTS INC

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09 JUN 15 PM 12: 14
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:
17555 COLLINS AVE SUITE 2502 SUNNY ISLES BEACH, FL. 33160

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: INVESTMENTS

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): MOSHE MANN
1755 COLLINS AVE SUITE 2502 SUNNY ISLES BEACH. FL 33160
HAIM SHKLASH
20189 NE 16TH PLACE MIAMI, FL 33179

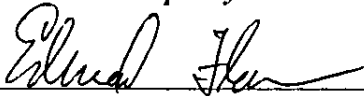
ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
EDWARD FLAXMAN 10730 SW WATERWAY LANE PORT ST LUCIE, FL. 34987

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: EDWARD FLAXMAN
10730 SW WATERWAY LANE PORT ST LUCIE, FL. 34987

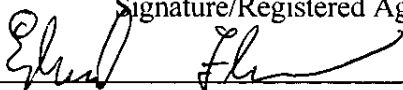
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

6/12/09

Date



Signature/Incorporator

6/12/09

Date