

P10000028851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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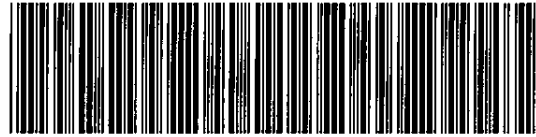
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-2-10 CH

COVER LETTER

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

SUBJECT: THUMBS UP COURIER 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: Munaf Mohamed
Name (Printed or typed)

138 N. Normandale Avenue
Address

Orlando, Florida 32835
City, State & Zip

407-290-0724
Daytime Telephone number

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:

THUMBS UP COURIER INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

138. N. Normandale Avenue

Orlando, Florida 32835

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:

ONE HUNDRED (100)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Munaf Mohamed-- President

Bibi Hashena Mohamed- Vice-President

138 N. Normandale
Orlando, Florida 32835

ARTICLE VI REGISTERED AGENT

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

Munaf Mohamed

138 N. Normandale Ave

Orlando, Florida 32835

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Munaf Mohamed

138 N. Normandale Ave

Orlando, Florida 32835

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

M. Mohamed

Signature/Registered Agent

Date

03-30-10

M. Mohamed

Signature/Incorporator

Date

03-30-10

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA