

P10000038956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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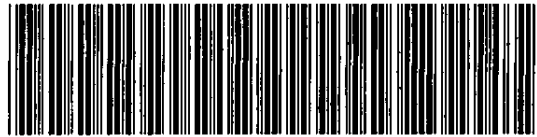
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10 MAY -5 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5-10-10 ch

COVER LETTER

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

SUBJECT: Gyro House of St Augustine, 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: Amjad Farhan

Name (Printed or typed)

210 St George Street, unit C3

Address

St Augustine Florida 32084

City, State & Zip

904-891-0318

Daytime Telephone number

LegendsAuto@hotmail.com

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:

Gyro House of St Augustine, Inc

ARTICLE II PRINCIPAL OFFICE

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

210 St George Street, unit C3

St Augustine Florida 32084

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Restaurant

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):

Amjad Farhan 1932 W Willesdon president
Dr, Jacksonville,
Fl, 32246

ARTICLE VI REGISTERED AGENT

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

Amjad Farhan

1932 W Willesdon Dr, Jacksonville, Fl, 32246

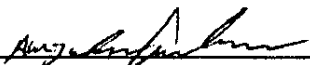
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

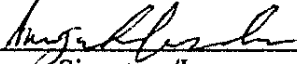
Amjad Farhan

1932 W Willesdon Dr, Jacksonville, Fl, 32246

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

5-3-10
Date

5-3-10
Date

FILED
10 MAY -5 AM 11:11
CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA