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(Requestor's Name)				
(Address)				
(Add	dress)	•		
(City	//State/Zip/Phono	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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SECRETARY OF STATE
IALL ANASSES OF STATE.

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COVER LETTER

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

SUBJECT: Majid A	SA Food inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: Ma	ajid Ehsan	(Duinted as town d)	
		e (Printed or typed)	
233	37 C Fillmore drive	Address	
<u>Ma</u>	rianna,FL 32448 City	, State & Zip	
850	0-482-2057 Cell: 850-960-1002	Felephone number	
	Daytinic	releptione number	
maj	idasainc@hotmail.com		
	E-mail address: (to be use	ed for future annual report	notification)

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
The name of the corporation shall be:	
Majid ASA Food Inc.	
,	
ARTICLE II PRINCIPAL OFFICE	
The principal street address and mailing address, if different is:	≅8 5
2255 Highway 71 Marianna FL 32448	
	JIN 15 PM 2:133 METARY OF STATE ANASSEE, FLORING
ARTICLE III PURPOSE	SET 5 M
The purpose for which the corporation is organized is: Subway of Marianna Walmart (Restaurant)	The P
Outhway of Mariania Walmart (KSSCW-4-17)	P. 2:
	長市 33
ARTICLE IV SHARES The number of shares of stock is:	
100 \	
List name(s) address(ss) and anaiss title(s):	
List name(s), address(es) and specific title(s): Majid Ehsan	
2255 Highway 71 Marianna FL 32448 President & Operation	
President & Operation	
<u>ARTICLE VI REGISTERED AGENT</u>	
The name and Florida street address (P.O. Box NOT acceptable) of the	registered agent is:
Nayla Ensan	
Majid Ehsan 2255 Highway 71 Marjauna FL 32448	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
mailed Ehsan	
The name and address of the Incorporator is: Majid Eh3911 2255 Highway 71 Marianna FL 32448	
2200 11	
*************	*********
Having been named as registered agent to accept service of process for place designated in this certificate, I am familiar with and accept the	
agree to act in this capacity	
Musa in a	offuloup
Signature/Registered Agent/,	06/14/2010
n i	06/14/2010
waynut .	<u> </u>
Signature/Incorporator	Date
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