

P11000050636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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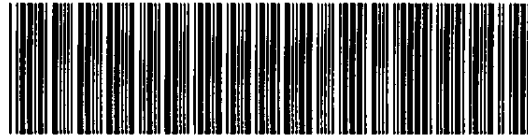
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/26/11--01016--017 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAY 26 PM 2:28

APPROVED
AND
FILED

1/1

COVER LETTER

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

SUBJECT: Port 1 Star, 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: Peter Hanna, Esq.

Name (Printed or typed)

500 S.E. 12th Street

Address

Fort Lauderdale, FL 33316

City, State & Zip

954-523-3444

Daytime Telephone number

peterhannalaw@att.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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: Port 1 Star, Inc.

11 MAY 26 PM 2:28

ARTICLE II PRINCIPAL OFFICE

Principal street address
598 N.W. 15th Street
Pompano Bch., FL 33060

Mailing address SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
All lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares no par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Thamer Almasri, PD</u>	Name and Title: _____
Address: <u>598 N.W. 15th Street</u>	Address: _____
<u>Pompano Bch., FL 33060</u>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: Thamer Almasri
Address: 598 N.W. 15th Street
Pompano Bch., FL 33060

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Thamer Almasri
Address: 598 N.W. 15th Street
Pompano Bch., FL 33060

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


Required Signature/Registered Agent

5/23/11

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator

5/23/11

Date