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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

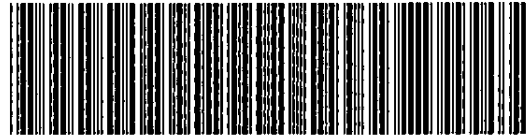
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

J. Shivers JAN 1-6 2012
167
174

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ZAHRA KHAN, ESQ., INC.
Name of Florida Profit Corporation

The enclosed Certificate of Conversion and fee(s) are submitted to convert a Florida Profit Corporation into an "Other Business Entity" in accordance with s. 607.1113, F.S.

Please return all correspondence concerning this matter to:

TOPKIN, SANDY

Contact Person

TOPKIN, EGNER, PARTLOW & RADER, P.L.

Firm/Company

1166 W. NEWPORT CENTER DRIVE, SUITE 309

Address

DEERFIELD BEACH 33442

City, State and Zip Code

zkhan@topkinegnerlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ZAHRA KHAN

Name of Contact Person

at (954)

422-8422

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☐ \$43.75 Filing Fee
and Certificate of
Status

☐ \$43.75 Filing Fee
and Certified Copy

☒ \$52.50 Filing Fee,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA

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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: ZAHRA KHAN, PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1166 W NEWPORT CENTER
DR. DEERFIELD BEACH
FL - 33442

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

prachice law, effective date of 1/1/12

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ZAHRA KHAN

Name and Title: _____

Address: 1166 W NEWPORT CENTER
DR. DEERFIELD
BEACH FL 33442

Address: _____

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: SANDY TOPKIN

Address: 1166 W NEWPORT CENTER DR.
DEERFIELD BEACH FL-33442

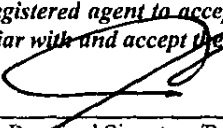
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ZAHRA KHAN

Address: 1166 W NEWPORT CENTER DR
DEERFIELD BEACH FL-33442

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

1/9/12
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

1/9/12
Date

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