P12000024551

(Requestor's Name)						
(Ad	(Address)					
(A)	idress)					
(Ad	idress)					
(Cit	ty/State/Zip/Phone	e #)				
	_					
PICK-UP	☐ WAIT	MAIL				
(Bu	isiness Entity Nan	ne)				
(Do	cument Number)					
Certified Copies	Certificates	of Status				
	_					
Special Instructions to	Filing Officer	_				
opeolal matractions to	rining Omoci.					
		:				
		;				
		•				
Office Use Only						
5,						



500224024865

03/12/12--01015--015 **70.00

FILED

12 MAR 12 PH 1: 15

SECRETARY OF STATE

T. Burch MAR 1 3 2012

COVER LETTER

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

SUBJECT:	BEGEL ENTE	RPRISES I	NC.	
Scholer.	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)	
Enclosed are an o	riginal and one (1) copy of the artic	les 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	& Certificate of Status	
FROM: _	BEGEL ENTER Name	PRISE'S TWC. (Printed or typed)	LEONARD	Gelfond
	9000 PARK BLU	10. # 7		
_	A	ddress		
_	SEMINULE F	CLORIDA 3	3111	
	727-398-632	•		
_	Daytime Te	lephone number		
	Gelfond & TAM			
	E-mail address: (to be used	tor tuture annual report n	otification)	

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 NA The name of the corpo	AME BEGEL Oration shall be:	ENTE	RPRISES	INC,
	RINCIPAL OFFICE Principal street address 1000 PARK BLUD, EUTE 7 SEHINOLE, FL, 33777	-	Mailing a	ddress, if different is:
ARTICLE III PU	TRPOSE h the corporation is organized is:	TAXI		FILED 12 MAR 12 PM 1: 15 SEGRITARY OF STATE FALLAHASSEE FLORDS
	ITIAL OFFICERS AND/OR DIREC			
Name and Title: Address:	LEONARD GELFOND	Name Addre		
	Scarle # 7		<u></u>	
	SEMINOLE, FL. 337	777		
	MILDRED GELFOND			
Address:	9000 PARK BLUD.	Addre	<u></u>	
	SEMINOLE, FL. 337	27		
Name and Title: Address:				
	EGISTERED AGENT a street address (P.O. Box NOT acceptal MILDRED G-ELFOND 9000 PARK BLUD, # 1 SEMINOLE, FL. 337	7	stered agent is:	
ARTICLE VII IN	ICORPORATOR			
	s of the Incorporator is: LEONARD GELFON			
Name: Address:	GENARD GELFONS 9000 PARK BLUD, # 7 SEHINOLE, FL. 339			
	as registered agent to accept service of p umiliar with and accept the appointment			ct in this capacity ,
Deor	raid Telfond		 ·	3/5/2012
	Required Signature/Registered Agen	nt		/ / Date
I submit this document document to the Depart	nt and affirm that the facts stated herei rtment of State constitutes a third degree	in are true. I a felony as provi	im aware that the ided for in s.817.15	false information submitted in a 5, F.S. $\frac{3/5/2012}{}$
- Jakon	Required Signature/Incorporator			Date