## P13000003330

(Re	questor's Name)				
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	<del>:</del> #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



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SECRETARY OF STATE
ALL ANASSEE, FLORID.

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## **COVER LETTER**

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

SUBJECT: Tah	iri Enterprise Inc	<b>,</b>	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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 CO	DPY REQUIRED
FROM: A	ndrea Tahiri		
11	Name 1712 Starfish Ave	e (Printed or typed)	
Ja	icksonville, Fl 32	Address 2246	
38	City, 36-316-0719	State & Zip	
	Daytime T	'elephone number	····

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

Andreatahiri@gmail.com

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the	NAME corporation shall be: Tahiri Enter	orise Inc.		
ARTICLE II	PRINCIPAL OFFICE			
	Principal street address	М	ailing address.	if different is:
	11712 Starfish Ave.	•••		,
	Jacksonville, Fl 32246			
ARTICLE III	PURPOSE			A S
The purpose for	which the corporation is organized is:			<b>S</b> S <b>C</b>
ARTICLE IV	tion is organized to run and operation i	ate a paint-your-pottery	place.	FILED  AN O: 59  RIASSEE, FLORID.
ADSTOLD IT	DUTIAL OFFICERS AND OR DO	BOTORO		
Name and	INITIAL OFFICERS AND/OR DIR Title: Andrea Tahlrl President			
Address:	11712 Starfish Ave.	Address:		<del></del>
Addicas.	Jacksonville, Fl 32246	Address		·
Name and	Γitle: Reda Tahiri Vice President	Name and Title:_		
Address:		Address:		
	Jacksonville, Fl 32246	<u> </u>		
Name and 1 Address:	Citle:	4 1 1		
ARTICLE VI	REGISTERED AGENT			
	orida street address (P.O. Box NOT acce	ptable) of the registered agent	is:	
Name:	Andrea Tahiri			
Address:	11712 Starfish Ave.			
	Jacksonville, Fi 32246			
ARTICLE VII	INCORPORATOR			
	Idress of the Incorporator is:			
Name:	Andrea Tahiri			
Address:	11712 Starfish Ave.			
	Jacksonville, FI 32246			
	ned as registered agent to accept service of amiliar with and accept the appointment			
	Required Signature/Registered A	gent	_	thate
	ument and affirm that the facts stated he Department of State constitutes a third deg	rein are true. I am aware th		
				112/013
	Required Signature/Incorporate	or	-	Date