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DIVISION OF CORPORATIONS

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INC

1. SAJ Delivery Services INC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

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SPECIAL INSTRUCTIONS:

COVER LETTER

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

SUBJECT: **SAJ DELIVERY SERVICES 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: **Sherry Parbhoo**

Name (Printed or typed)

1443 SW 150 Terrace

Address

Davie FL 33326

City, State & Zip

201 519-9721

Daytime Telephone number

Parbhoo@Comcast.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)

ARTICLE I NAME
The name of the corporation shall be: SAJ DELIVERY SERVICES INC.

ARTICLE II PRINCIPAL OFFICE
Principal street address

1443 SW 150 TERRACE
DAVIE FLORIDA 33326

Mailing address, if different is:

1443 SW 150 TERRACE
DAVIE FLORIDA 33326

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Package Delivery

ARTICLE IV SHARES 200
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sherry Parbhoo -President

Address 1443 SW 150 Terrace
Davie FL 33326

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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TALLAHASSEE FLORIDA

(conti.)

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: Sherry Parbhoo
Address: 1443 SW 150 Terrace
Davie FL 33326

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Sherry Parbhoo
Address: 1443 SW 150 Terrace
Davie FL 33326

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

5/20/14
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

5/20/14
Date

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