

PI4 000082902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 OCT -8 PM 1:00

RECEIVED
14 OCT -8 PM 4:31
DIVISION OF CORPORATIONS

10/8/14

COVER LETTER

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

SUBJECT: _____

AGAS of Leon, Inc
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: _____

Ahmet Sadek

Name (Printed or typed)

1370 Ocala Rd. #207

Address

Tallahassee, FL 32304

City, State & Zip

850 228 2831

Daytime Telephone number

asadek@gmail.com

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: AGAS of Leon, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1370 Ocala Rd. #207
Tallahassee, FL

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: We sell and distribute
products and online sales.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 OCT -8 PM 1:00

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ahmet Sodek Name and Title: _____

Address 1370 Ocala Rd Address: _____
#207
Tallahassee, FL 32304

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(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:

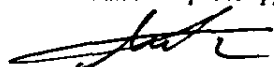
Name: Ahmet Sodek
Address: 1370 Ocala Rd. #207
Tallahassee, FL 32304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ahmet Sodek
Address: 1370 Ocala Rd. #207
Tallahassee, FL 32304

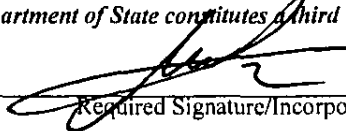
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

10/8/2014
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

10/8/2014
Date