

P15000020549

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

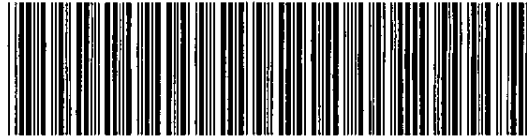
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only
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MAR 04 2015

T. SCOTT



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01/26/15--01019--003 **78.00

15 FEB 27 PM 1:26

6/1/2015 1:26 PM



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 16, 2015

S. SHARFI
ACCOUNTING ADVANTAGE 925 S.M. TRAIL D-4
WEST PALM BEACH, FL 33415

SUBJECT: TAHIRA SAMI
Ref. Number: W15000007520

We have received your document for TAHIRA SAMI and your check(s) totaling \$78.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 915A00003208

RECEIVED

15 FEB 27 AM 10:43

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

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

SUBJECT: OLD DIXIE CAFE 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: _____
Accounting Advantage
Name (printed or typed)
925 S. Military Tr. # D4
West Palm Beach, FL 33415
Ph: (561) 687-6466 Fx: (561) 687-6469
Address
general@accountingadvantageusa.com

City, State & Zip

561-687-6466

Daytime Telephone number

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

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

1/20/15

The Secretary ,
State of Florida,
Tallahassee, FL 32314

Dear Madam/ Sir

I would like to bring in your kind knowledge that I used to own a CORPORATION NAMED
" OLD DIXIE CAFÉ INC. " which I do not want to Reinstate it rather I want to form a new
Corporation using the same name of " OLD DIXIE CAFÉ INC.",. I am submitting herewith
Incorporation application along with required fee.

I will be highly grateful to you honor for this kindness.

Thanking you,

Yours Sincerely,

A handwritten signature in cursive script, appearing to read 'Tahira Sami', with a horizontal line drawn through the middle of the signature.

(Tahira Sami)

925 S.Military Trail Suit D-4

WPB, FL 33415

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: OLD DIXIE CAFE INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

300 N. OLD DIXIE HWAY
Jupiter, FL 33458

Mailing address, if different is:

925 "S" Military Trail HD-4
W. P. B., FL 33415
West Palm Beach, FL 33415

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Restaurant & Lawful Business

15 FEB 27 PM 1:26

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: President Name and Title: TAHIRA SAMI PR

Address: _____ Address: 1306 CAPE MAY LN
Greenacres, FL 33413

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(cont.)

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: S. SHARFI
Address: 925 S Military Trail #D-4
W.P.B., FL 33415
West Palm Beach FL

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: S. SHARFI
Address: 925 S Military Trail #D-4
W.P.B., FL 33415
West Palm Beach FL

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

2/18/2015
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

2/18/2015
Date