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36

FLORIDA PROFIT/NON PROFIT CORPORATION KHOURY'S TAILORING INC

Certificate of Status	0
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April 13, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

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SUBJECT: KHOURY'S TAILORING INC

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Neysa Culligan Regulatory Specialist II FAX Aud. #: E16000088319 Letter Number: 916A00007359

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

The name of the corporat	tion shall be: KHOURY'S TAILORING	1140	
<u>ARTICLE II PRINC</u>	<u>IPAL OFFICE</u> Principal <u>street</u> address	Mailing addre	ss, if different is:
9211 SW 136 STREET CIRCLE MIAMI, FL 33176		9211 SW 136 STREET CIRCLE	
		MIAM1, FL 33176	
ARTICLE III PURPO The purpose for which t	<u>25E</u> he corporation is organized is:any and	all lawful business.	
			200 m
			700 F
ARTICLE IV SHAR The number of shares of		····	E: 50
ARTICLE V INITIA	AL OFFICERS AND/OR DIRECTORS		
Name and Tith	e: P - JOSEPH EL KHOURY 92!1 SW 136 STREET CIRCLE	Name and Title:Address:	
	MIAMI, FL 33176		
Name and Title Address	T - LAURA EL KHOURY	Name and Title:	
	9211 SW 136 STREET CIRCLE	Address:	
	MIAMI, FL 33176		
ar tenta			
	*		
Address		Address:	

Name a	ind Title:	Name and Title:	
Addres	95	Address:	
	REGISTERED AGENT		•
The <u>name and</u>) Name:	Florida street address (P.O. Box NOT acceptal JOSEPH EL KHOURY	ole) of the registered agent is:	
Address:	9211 SW 136 STREET CIRCLE		7.00 6
	MIAMI, FL 33176		APR.
ARTICLE VII	INCORPORATOR		SET PH
The name and	address of the Incorporator is:		69 5
Name:	Joseph el Khoury		55 S
Address:	9211 SW 136 STREET CIRCLE		-
	MIAMI, FL 33176		·
Effective date, i	EFFECTIVE DATE: If other than the date of filing: date is listed, the date must be specific and chiling.)	annot be more than five business	s days prior or 90 business
Note: If the dat the document's	to inserted in this block does not meet the application of State's reco	cable statutory filing requirements, ords.	this date will not be listed as
Having been no this certificate.	amed as registered agent to accept service of pr I am familiar with and accept the appointment	ncess for the above stated corpora as registeted agent and agree to ac	ttion at the place designated in I in this capacity
	LOSEPHER Khoudo If		·
	Required Signature/Registered Agent		Date
I submit this do document to the	ocument and affirm that the facts stated herein Department of State constitutes a third degree	e are true. I am aware that the fai felony as provided for in s.817.155	lse information submitted in a i, F.S.
	SEPH EXHAURA THE	:	
Requ	itted Signature/Incorporator		Date