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(Re	equestor's Name)			
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PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
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## **COVER LETTER**

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

SUBJECT: CF	RAZY	4 HUMMUS INC (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)		
Enclosed are an	origi	nal and one (1) copy of the art	icles of incorporation and	l a check for:	_	
■ \$70. Filing F		\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM	:		e (Printed or typed)		_	
		LAHASSEE, FL 32304	Address		16 HAY	SECRETA TALLAH
	City, State & Zip 813-679-2002				17 PH 2:	APY OF S
	SALI	EHHALLOUM@YAHOO.COM	elephone number		: 55	TATE
		E-mail address: (to be used	d for future annual report n	otification)		

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 corporat	ion shall be: CRAZY 4 HUMMUS II	NC	
ARTICLE II PRINC	IPAL OFFICE Principal <u>street</u> address		Mailing address, if different is:
TALLAHASSEE, FL 3			
ARTICLE III PURPO The purpose for which the	PSE ne corporation is organized is: <u>A</u> v	ry and all	Lamful Bousiness
			SECRE 16 MAY
			Y 17 PH
			2: 55
	L OFFICERS AND/OR DIRECTOR  SALEH HALLOUM PR	S Name and Title	AHMAD ABOU-GHOSH, VP
Address	1412 ALABAMA ST	Address:	4929 OUTLOOK CT
	TALLAHASSEE, FL 32304		TALLAHASSEE, FL 32303
Name and Title:		Name and Title	· · · · · · · · · · · · · · · · · · ·
Address		Address:	
Address			
		<b>-</b>	

Name	and Title:	Name and Title:	
Addre	ess	Address:	
	<del></del>		
	<del></del>	<del></del>	
	REGISTERED AGENT Florida street address (P.O. Box NOT accept	table) of the registered agent is:	
Name:	SALEH HALLOUM	· · · · ·	16 SE
Address:	1412 ALABAMA STREET		HAY PAS
	TALLAHASSEE, FL 32304		ARYE
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		ED OF STAI OR COR PH 2:5
The name and	address of the Incorporator is:		2 DA
Name:	SALEH HALLOUM		
Address:	1412 ALABAMA ST		
	TALLAHASSEE, FL 32304	<del></del>	
Effective date,	I EFFECTIVE DATE:  if other than the date of filing:  e date is listed, the date must be specific and filing.)		s days prior or 90 business
	ate inserted in this block does not meet the app s effective date on the Department of State's re		this date will not be listed as
	amed as registered agent to accept service of I am familiar with and accept the appointmen		
	1		
	Required Signature/Registered Ag	ent	Date
	ocument and affirm that the facts stated her e Department of State constitutes a third degr		
n			Date
.ace o	wired Signature/Incorporator		Date