

P/6000049155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

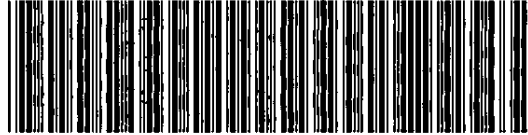
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400284980184

05/09/16--01035--013 **70.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAY 27 AM 6:59

msm



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 17, 2016

AWADH ABDUL RAHMAN AWADH
244 BISCAYNE BLVD., APT. #3304
MIAMI, FL 33132

SUBJECT: AWAD WATCHES INC
Ref. Number: W16000035774

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAY 27 AM 6:59

We have received your document for AWAD WATCHES INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return 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.

Matthew T Moon
Regulatory Specialist II

Letter Number: 216A00010372

RECEIVED
16 MAY 27 AM 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAY 27 AM 4:59

SUBJECT: AWAD WATCHES 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: AWADH ABDUL RAHMAN AWADH
Name (Printed or typed)

244 Biscayne Blvd Apt # 3304
Address

Miami, FL 33132
City, State & Zip

305 773 0012
Daytime Telephone number

awad_ba@hotmail.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

AWAD WATCHES INC

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

22nd NE 2st STREET, SUITE 103

MIAMI, FL 33132

ARTICLE III PURPOSE

RETAIL WATCHES

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

1,000,000

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Awadh Abdul Rahman Awadh-Owner

Name and Title: _____

Address 244 Biscayne Blvd

Address: _____

Apt#3304

Miami, FL 33132

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAY 27 AM 6:59

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: Awadh Abdul Rahman Awadh
Address: 244 Biscayne Blvd, Apt#3304
Miami, FL 33132

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Awadh Abdul Rahman Awadh
Address: 244 Biscayne Blvd, Apt#3304
Miami, FL 33132

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAY 27 AM 6:59

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

05/05/2016

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

05/05/2016

Date