

PI6000050816

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

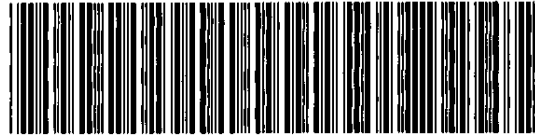
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200286644472

06/10/16--01008--014 **70.00

RECEIVED
DEPARTMENT OF STATE
16 JUN 10 AM 11:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JUN 10 AM 11:45

APPROVED
AND
FILED

COVER LETTER

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

SUBJECT: Dal ayla 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:

Radad M. Abdallah

Name (Printed or typed)

685 W. Tennessee St.

Address

Tallahassee, FL, 32304

City, State & Zip

386-898-4654

Daytime Telephone number

radadabdallah@yahoo.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: Dalayla INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

685. W. Tennessee St.
Tallahassee, FL, 32304.

Same as

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and ALL Lawful Business

16 JUN 10 AM 11:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA

APPROVED
AND
FILED

ARTICLE IV SHARES

The number of shares of stock is: 2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Radad M. Abdallah</u>	Name and Title: <u>Khalil Taha Nase Abu Kdiess</u>
Address: <u>President</u>	Address: <u>Vice President</u>
<u>685. W. Tennessee, 3rd</u>	<u>685. W. Tennessee St,</u>
<u>Tallahassee, FL, 32304</u>	<u>Tallahassee, FL, 32304.</u>

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: Radad Abdallah

Address: 685 W. Tennessee St.

Tallahassee, FL, 32304

ARTICLE VII INCORPORATOR

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

Name: Radad Abdallah

Address: 685 W. Tennessee St.

Tallahassee, FL, 32304

APPROVED
AND
FILED
16 JUN 10 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

06/10/2016
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

06/10/2016
Date