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16 SFP -8 PM 2: 01

COVER LETTER

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

SUBJECT: RER	1 STAR	INC	
	(PROPOSED CORPORA	FE NAME – <u>MUST INCLU</u>	DE SUFFIX)
Enclosed are an original an	d one (1) copy of the arti	cles of incorporation and	a check for:
Filing Fee Filin	78.75 ng Fee ertificate of Status	\$78.75 Filing Fee & Certified Copy	
		ADDITIONAL CO	PY REQUIRED
•	NUR RASHID Name		
	1 NW 17474	Address	
FANN	ING SPRING.	S, FL 31693 State & Zip	
850	- 371- 2-322 Daytime To		
	Daytime To	elephone number	
	E-mail address: (to be used	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)

16 SEP -8 FF 2: 09

name of the corpor	E ation shall be:	RGR1	STAR	INC	TATT AMARES	
•	Principal street addr			AME	address, if different	
ANNING	SPRINUS	FL 326	93			
FICLE III PURP purpose for which	OSE the corporation is org	gunized is:	ny AND	ALL	LAWFUL	BUSINE
*ICLE IV SHAR number of shares o	RES f stock is: +60	y. 2 <u> </u>				
TICLE V INITI	RES I stock is: +60 AL OFFICERS AND Ie: HARUNUR	OOR DIRECTORS		itle:	RESIDENT	
number of shares o	AL OFFICERS AND Le: HARUNUR 8731 NW 1	NOR DIRECTORS RASHID ME 747H ST	AH Name and T		PESIDENT	
number of shares of shares of shares of shares and Tite Address Name and Title	1 stock is: +00 AL OFFICERS AND Ie: HARDNUR 8731 NW 17 FANNING EXECUTE: COLAM	NOR DIRECTORS RASHID ME 747H ST SPRINGS,	AH Name and T Address: FL 32 69		PESIDENI	
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Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) o	
Name: HARUNUR RASHID ME	<u>A</u> H
Address: 8731 NW 174 TH S	_7
FANNING SPRINGS, F	L 32693
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: HARUNUR RASHID N	1E44
Address: 8731 NW 174 TH ST	
FAMNING SPRINGS,	FL 32693
ARTICLE VIII EFFECTIVE DATE:	
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot	
days after the filing.)	
Note: If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's records.	
Having been named as registered agent to accept service of proces this certificate. I am familiar with and accept the appointment as re	
1 Level (2 - 9 Level	mala 8/11
Required Signature/Registered Agent	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 felo	
Ham (Kashing	09/08/16
Required Signature/Incorporator	Date