

P/60000 73244

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

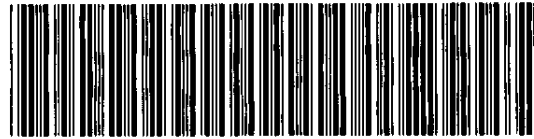
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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09/08/16--01021--009 \*\*315.00

16 SEP -8 PM 2:20  
RECEIVED  
DEPARTMENT OF STATE  
ADVISORY

16 SEP -8 PM 2:01  
RECEIVED  
DEPARTMENT OF STATE

## COVER LETTER

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

SUBJECT: PER 2 STAR 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: HARUNUR RASHID MEAH  
Name (Printed or typed)

17976 NW US Hwy 19  
Address

FANNING SPRINGS, FL 32693  
City, State & Zip

850-371-2322  
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

RECEIVED  
AND  
FILED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) 16 SEP -8 PM 2:17

ARTICLE I NAME

The name of the corporation shall be: RER 2 STAR INC ~~SECRETARY OF STATE~~

ARTICLE II PRINCIPAL OFFICE

Principal street address: 17976 NW US HWY 19 Mailing address, if different is: SAME  
FANNING SPRINGS, FL 32693

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HARUNUR RASHID MEAH Name and Title: PRESIDENT

Address: 17976 NW US HWY 19 Address: FANNING SPRINGS, FL 32693

Name and Title: GOLAM KAWSAR Name and Title: PRESIDENT

Address: 17976 NW US HWY 19 Address: FANNING SPRINGS, FL 32693

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: HARUNUR RASHID MEAH  
Address: 17976 NW US HWY 19  
FANNING SPRINGS, FL 32693

**ARTICLE VII INCORPORATOR**

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

Name: HARUNUR RASHID MEAH  
Address: 17976 NW US HWY 19  
FANNING SPRINGS, FL 32693

**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

Harun Rashid  
Required Signature/Registered Agent

09/08/16  
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.

Harun Rashid  
Required Signature/Incorporator

09/08/16  
Date