

P/7000040531

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

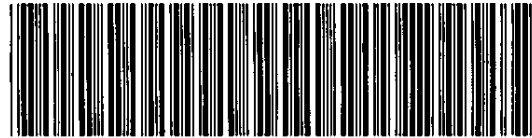
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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05/05/17--01026--003 **78.75

RECEIVED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

17 MAY -5 PM 12:01

EFFECTIVE DATE 05/01/17

2 05/08/17

Terence N. Thurson

Full Service Accounting Firm

8672 Phillips Highway

Jacksonville, FL 32256

Tele: (904) 764-7717

Fax: (904) 652-0365

Email: tntrlt1@bellsouth.net

Web: thursonaccounting.com

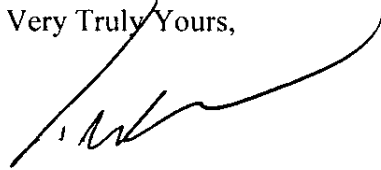
May 1, 2017

RE: P15000102491
SAFARI GLOBAL INC
Attn: Nabil Hureira
3501 Townsend Blvd Apt 158
Jacksonville, FL 32277

To Whom This May Concern,

The above referenced individual Mr. Nabil Hureira is the owner of this corporation and has no plans on reinstating the old corporation. He would like to start a new corporation but with the same name.

Very Truly Yours,



Terence N Thurson



Nabil Hureira - President

FILED
17 MAY -5 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: SAFARI GLOBAL 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: NABIL HUREIRA

Name (Printed or typed)

3501 TOWNSEND BLVD APT 158

Address

JACKSONVILLE, FL 32277

City, State & Zip

904-764-7717

Daytime Telephone number

TNTRLT1@BELLSOUTH.NET

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: SAFARI GLOBAL INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
3501 TOWNSEND BLVD
APT 158
JACKSONVILLE, FL 32277

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any or all lawful business.

FILED
17 MAY -5 PM 12:01
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>NABIL HUREIRA</u>	Name and Title:	_____
Address	<u>3501 TOWNSEND BLVD</u>	Address:	_____
	<u>APT 158</u>		_____
	<u>JACKSONVILLE, FL 32277</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: NABIL HUREIRA _____

Address: 3501 TOWNSEND BLVD APT 158 _____

JACKSONVILLE, FL 32277 _____

ARTICLE VII INCORPORATOR

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

Name: NABIL HUREIRA _____

Address: 3501 TOWNSEND BLVD APT 158 _____

JACKSONVILLE, FL 32277 _____

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17 MAY -5 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

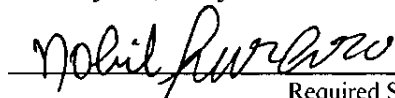
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 05/01/2017. (OPTIONAL)

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

5-1-17

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

05/01/2017

Date