

P17000045686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

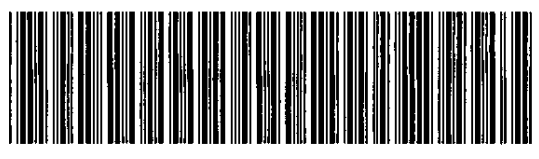
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/22/17--01032--022 **10.00

FILED
17 MAY 22 AM 10:23
CLERK OF STATE
TALLAHASSEE, FLORIDA

05/24/17

COVER LETTER

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

SUBJECT: Bathroom Vanity & More 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: Fridon Haj

Name (Printed or typed)

4225 N Hubert Ave

Address

Tampa FL 33614

City, State & Zip

813 889-8886

Daytime Telephone number

info@homedesignplaza.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: Bathroom Vanity & More Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

4225 N Hubert Ave

Tampa FL 33614

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Corporation shall engage in any activity or

business permitted under the laws of the United States and of the State of Florida

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17 MAY 22 AM 10:23
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Fridon Haj

Address: 10443 Greendale Dr

Tampa FL 33626

Name and Title: Mojtaba Esmkhani

Address: 10418 Greendale Dr

Tamap FL 33626

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

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: J W Feyl Accounting Services Inc

Address: 14011 Middleton Way

Tampa FL 33624

ARTICLE VII INCORPORATOR

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

Name: Fridon Haj

Address: 10443 Greendale Dr

Tampa FL 33626

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 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

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

Date

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17 MAY 22 AM 10:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

5/17/17

5-18-17