

P17000059055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

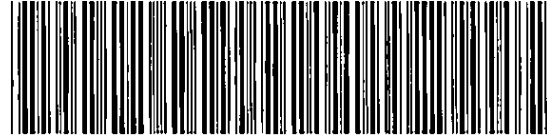
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Mediterranean

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STATE OF CALIFORNIA
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2017 JUL 11 3:34 PM
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COVER LETTER

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

SUBJECT: Kabob's Grille
(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: Khalid Nabulsi
Name (Printed or typed)

5540 Mossy Top way
Address

Tallahassee, FL 32303
City, State & Zip

850-445-0972
Daytime Telephone number

Khalid.Nabulsi.2016@gmail.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: Kabobs Mediterranean Grille Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2621 Springhill Rd
Tallahassee FL 32305

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To sell food out
of Food Truck in form of sandwiches

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Khalid Nabulsi President Name and Title: Khalid Nabulsi

Address: 5540 Mossy Top Way Address: Tallah FL 32303

Name and Title: Khalid Nabulsi Vice President Name and Title: Khalid Nabulsi

Address: same Address:

Name and Title: Betal Nabulsi Treasurer Name and Title: Betal Nabulsi

Address: 5540 Mossy Top Way Address: Tallah FL 32303

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STATE
JUL 17 PM 4:10

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: Khalid Mahbubi
Address: 5540 Mossy Top way
Tallah FL 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Khalid Mahbubi
Address: 5540 Mossy Top way
Tallah FL 32303

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SECRETARY OF STATE
TALLAHASSEE, FL
17 JUL 11 PM 4:10

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

Khalid Mahbubi

Required Signature/Registered Agent

7-11-17

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.

Khalid Mahbubi

Required Signature/Incorporator

7-11-17

Date