

P17000071762

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

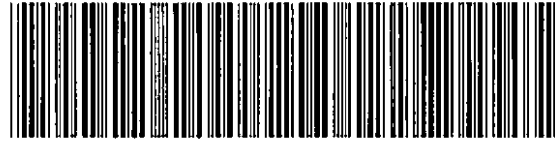
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 AUG 28 AM 10:09

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2017 AUG 28 11:04:12
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CLERK OF COURT

08/28/17

COVER LETTER

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

SUBJECT: _____

M J K Food Mart
(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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: _____

MOUSSA NABULSI

Name (Printed or typed)

2009 Indian Springs Ct

Address

Tall. Fla 32303

City, State & Zip

850-895-7350

Daytime Telephone number

Mike.Nabulsi52 at G mail: 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: M & K Foodmart Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2009 Indian Springs Ct
Tall FL. 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Convenience Store
Gas Station

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Moussa Nebulsi Name and Title: president

Address: 2009 Indian Springs Ct Address: _____
Tall FL 32303

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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2017 AUG 28 11:00:12
CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA

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: Moussa Nabouly

Address: 2009 Indian Springs Ct
Tall. Fl. 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Moussa Nabouly

Address: 2009 Indian Springs Ct
Tall. Fl. 32301

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TALLAHASSEE, FLORIDA

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:

Moussa Nabouly
Required Signature/Registered Agent

8-28-17
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.

Moussa Nabouly
Required Signature/Incorporator

8-28-17
Date