Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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FLORIDA PROFIT/NON PROFIT CORPORATION MEDITERRANEAN BISTRO CORP

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Certificate of Status	0
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Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:	
mediterranean Rista	
ARTICI P. II. PRINCIPAL OF THE	~
The principal street address of the principal street address o	, ,
The principal street address and mailing address is: 416 Sw 20 Rd Myani - 61 33129 SRR	
- 1 33129 SE	>
OF S	-
OF STATE E. FLORID.	?
ARTICLE III SHARES: The number of shares of stock is:	9
——————————————————————————————————————	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
Mohamad J Al-Hadari (P)	
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
Mohamad J Al-Hadari	
The SW 20 Rd	
Miami FL 33129	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	
Mohamad J Al-Hadari	
416 SW 20 Rd	
Miami FL 33129	

Required Signatures:

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

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 ims.817.155. F.S.

Incorporator

Date

2018 MAY TO AM 10: 19
SECRETARY OF STATE