

P/80000 59786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

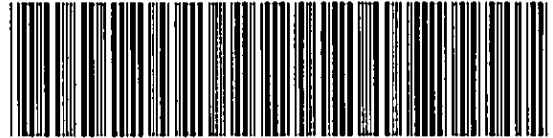
Special Instructions to Filing Officer:

Office Use Only

VV18000051318

JUL 11 2019

T. SCOTT



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05/29/18--01031--019 \*\*78.75

2019 JUN -5 AM 7:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 31, 2018

ASHWIN K SABBANI  
8000 WEST DRIVE, APT 121  
NORTH BAY VILLAGE, FL 33141

SUBJECT: DADE MADE GOODS, INC.  
Ref. Number: W18000051318

We have received your document for DADE MADE GOODS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.  
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

Letter Number: 418A00011331

RECEIVED  
2018 JUL -5 PM 12:44  
REGISTRATION  
COMMERCIAL  
SERVICES  
JD

## COVER LETTER

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

**SUBJECT:** Dade Made Goods, 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      ☒ \$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:** Ashwin K. Sabbani  
\_\_\_\_\_  
Name (Printed or typed)

8000 West Drive, Apt 121  
\_\_\_\_\_  
Address

North Bay Village, FL 33141  
\_\_\_\_\_  
City, State & Zip

269-830-3202  
\_\_\_\_\_  
Daytime Telephone number

ashwin.sabbani@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: Dade Made Goods, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

8000 West Drive, Apt 121

North Bay Village, FL 33141

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Manufacture and sale of packaged and canned foods, of clothing and other retail items, and for any  
and all other lawful business

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Ashwin Sabbani, President

Name and Title:

Address: 8000 West Drive, Apt 121

Address:

North Bay Village, FL 33141

Name and Title: Patrick Breen, Vice President

Name and Title:

Address: 9750 Crescent Park Circle, Apt 534

Address:

Orland Park, IL 60462

Name and Title:

Name and Title:

Address:

Address:

FILED  
2018 JUN -5 AM 7:22  
SECRETARY OF STATE  
TALLAHASSEE, 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: Ashwin Sabbani \_\_\_\_\_

Address: 8000 West Drive, Apt 121 \_\_\_\_\_

North Bay Village, FL 33141 \_\_\_\_\_

**ARTICLE VII INCORPORATOR**

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

Name: Ashwin Sabbani \_\_\_\_\_

Address: 8000 West Drive, Apt 121 \_\_\_\_\_

North Bay Village, FL 33141 \_\_\_\_\_


**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.)

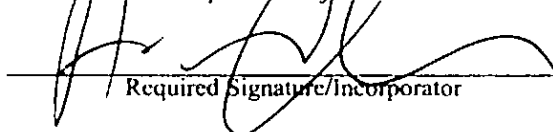
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

7/1/2018  
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

7/1/2018  
Date