

P180000080548

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

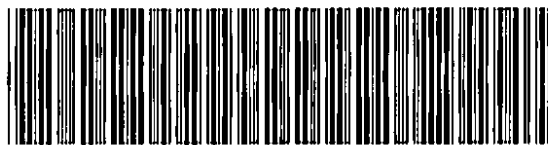
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/26/18--01003--002 **78.75

CLERK OF THE COURT
DIVISION OF CORPORATION
18 SEP 25 PM 2:45
TALLAHASSEE, FLORIDA

18 SEP 26 AM 10:06

K. PAGE
SEP 26 2018

COVER LETTER

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

SUBJECT: Oula's Cuisine, 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: Mervin Nabulsi
Name (Printed or typed)

1705 Sandestin Rd
Address

Tallah FL 32303
City, State & Zip

252 559-7704
Daytime Telephone number

MervinAFAF@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: Oula's Cuisine Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1705 San Dami Same
Tallahassee FL 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Food Truck To sell Ready to
order Meal. Hamburger, wings

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Merhi Nabulsi President
Owner
Address: 1705 San Dami ~~Owner~~
Tallah FL 32303 ~~Owner~~

Name and Title: AFAE Nabulsi Vice President
Address: 1705 San Dami
Tall FL 32303

Name and Title: _____ Name and Title: _____
Address: _____ 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:

Mervin Mabsulsi

Address:

1705 San Devin
Tall FL 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Mervin Mabsulsi -

Address:

1705 San Devin
Tallah FL 32303

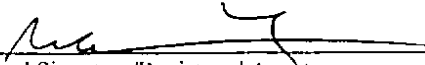
ARTICLE VIII EFFECTIVE DATE:

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.)

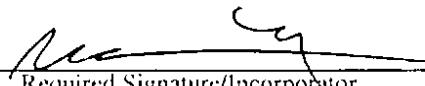
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

9/26/2018
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

9/26/2018
Date