

P19 000 000 682

(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



700322244807

12/27/18--01012--013 **78.75

FILED
18 DEC 27 AM 9:31
SEALAND COUNTY
TALLAHASSEE, FLORIDA

D O'KEEFE

JAN 04 2019

COVER LETTER

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

SUBJECT: Malak Business Enterprises, 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: Simon Malak
Name (Printed or typed)

510 Greenbriar Blvd.
Address

Altamonte Springs, FL 32714
City, State & Zip

(310) 701-2600
Daytime Telephone number

SMALAK@MBREG.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: Malak Business Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1348 Valley Pine Circle

2355 Westwood Blvd., Ste 1130

Apopka, FL 32712

Los Angeles, CA 90064

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Financial and Real Estate Investments

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Simon Malak - CEO

Name and Title: Simon Malak - CFO

Address: 510 Greenbriar Blvd.
Altamonte Springs, FL 32714

Address: 510 Greenbriar Blvd.
Altamonte Springs, FL 32714

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

FILED
18 DEC 27 AM 9:32
CLERK OF DISTRICT COURT
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: Simon Malak
Address: 1348 Valley Pine Circle
Apopka, FL 32712

ARTICLE VII INCORPORATOR

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

Name: Simon Malak
Address: 1348 Valley Pine Circle
Apopka, FL 32712

FILED
18 DEC 27 AM 9:32
TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/01/2019 (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

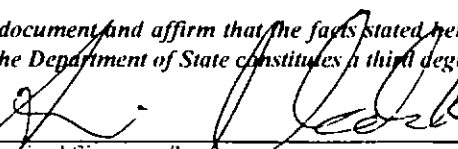


Required Signature/Registered Agent

12/18/2018

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

12/18/2018

Date