

P19 0000 29 489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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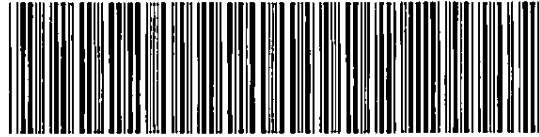
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/05/19--01007--008 **147.50

19 APR -5 AM 12:02

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2019 APR -5 PM 4:55
CLERK

DK

COVER LETTER

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

SUBJECT: Iconic Automotive 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: Mehdi Moeini

Name (Printed or typed)

1765 E Nine Mile Rd Suite 1 Unit 112

Address

Pensacola, FL 32514

City, State & Zip

850-876-9590

Daytime Telephone number

m.moeini@mc.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: Iconic Automotive Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1765 E Nine Mile Rd

Suite 1 Unit 112

Pensacola, FL 32514

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

The purpose of which the Corporation is organized is to transact any and all lawful business for which corporations
may be incorporated under code of Florida

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mehdi Mocini / President

Name and Title: _____

Address 1765 E Nine Mile Rd

Address: _____

Suite 1 Unit 112

Pensacola, FL 32514

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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OF
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: Mehdi Moeini _____

Address: 1765 E Nine Mile Rd Suite 1 Unit 112 _____

Pensacola, FL 32514 _____

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Mehdi Moeini _____

Address: 1765 E Nine Mile Rd Suite 1 Unit 112 _____

Pensacola, FL 32514 _____

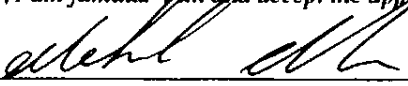
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 04/01/2019 (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

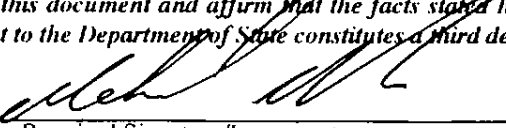


Required Signature/Registered Agent

04/04/2019

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

04/04/2019

Date