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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H19000314366 3)))



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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : AVA FINANCIAL CONSULTANTS INC
Account Number : I20170000094
Phone : (954)842-1979
Fax Number : (954)905-4315

19 OCT 23 PM 12:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: avesta.usa@gmail.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
786 TRADERS INC**

| | |
|-----------------------|---------|
| Certificate of Status | 1 |
| Certified Copy | 1 |
| Page Count | 04 |
| Estimated Charge | \$87.50 |

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COVER LETTER

'H190003143663'

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

SUBJECT: 786 TRADERS 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: AMJAD A. KHAN

Name (Printed or typed)

6923 CYPRESS ROAD, #C12

Address

PLANTATION, FL 33317

City, State & Zip

786-477-7000

Daytime Telephone number

avesta.usa@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be:

786 TRADERS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6923 CYPRESS ROAD, #C12

6923 CYPRESS ROAD, #C12

PLANTATION, FL 33317

PLANTATION, FL 33317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1,000 SHARES AT \$1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: AMJAD A. KHAN

Name and Title: N/A

Address 6923 CYPRESS ROAD, #C12

Address:

PLANTATION, FL 33317

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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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: AMJAD A. KHAN
Address: 6923 CYPRESS ROAD, #C12
PLANTATION, FL 33317

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: AMJAD A. KHAN
Address: 6923 CYPRESS ROAD, #C12
PLANTATION, FL 33317

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

AMJAD A KHAN

Required Signature/Registered Agent

10/23/2019

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.

AMJAD A KHAN

Required Signature/Incorporator

10/23/2019

Date