

-P19000094272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

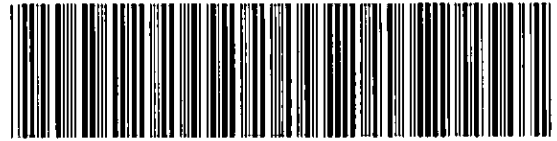
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



500338332735

12/23/19--01001--014 **70.00

2019 DEC 23 PM 1:52

FILED

2019 DEC 23 PM 2:02

STATE BAR, LLC
TALLAHASSEE, FL 32301

COVER LETTER

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

SUBJECT: _____

TAYM2020 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: _____

Iyad Abdalnabi

Name (Printed or typed)

4851 Heritage Park Blvd.

Address

Tallahassee FL 32311

City, State & Zip

850-228-4489

Daytime Telephone number

iyadkamal@hotmail.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: TA YM 2020 INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

824 W. Tharpe St
Tallahassee, FL 32303

Mailing address, if different is:

4851 Heritage Park Blvd.
Tallahassee, FL 32311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any lawful business

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Iyad Abdalnabi - PRES Name and Title: _____

Address 4851 Heritage Park Blvd Address: _____
Tallahassee, FL 32311

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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2019 DEC 23 PM 2:02
STATE OF FLORIDA
TALLAHASSEE

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: Iyad Abdalnabi
Address: 4851 Heritage Park Blvd.
Tallahassee, FL 32311

ARTICLE VII INCORPORATOR

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

Name: Iyad Abdalnabi
Address: 4851 Heritage Park Blvd.
Tallahassee, FL 32311

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TALLAHASSEE, FL
CLERK OF SUPERIOR COURT

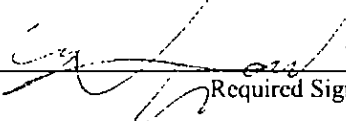
ARTICLE VIII EFFECTIVE DATE:

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.)

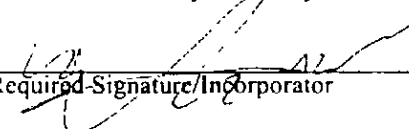
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

12/23/19
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

12/23/19
Date