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(Requestor's Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 FEB 25 AM 10:07

COVER LETTER

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

SUBJECT: Golden Falcon Liquor, 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: Raed Haifa
Name (Printed or typed)

7053 Sawley Lane
Address

Tallahassee, FL 32317
City, State & Zip

850-345-3837
Daytime Telephone number

Rhaifa86@yahoo.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: Golden Falcon Liquor, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
7053 Sawley Lane
Tallahassee, FL 32317

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Placing a beverage
license into this corporation name

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

(P) Name and Title: Manager : Reed Haifa Name and Title: _____

Address 7053 Sawley Lane Address: _____

Tallahassee, FL 32317

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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DIVISION OF CORPORATION
20 FEB 25 AM 10:07

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: Raed Haifa
Address: 7053 Sawley Lane
Tallahassee, FL 32317

ARTICLE VII INCORPORATOR

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

Name: Raed Haifa
Address: 7053 Sawley Lane
Tallahassee, FL 32317

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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

X [Signature]
Required Signature/Registered Agent

02/24/20
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.

X [Signature]
Required Signature/Incorporator

02/24/20
Date