

P20000055084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

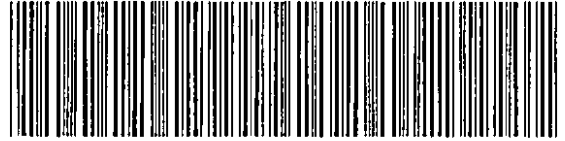
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/24/20--01021--017 **70.00

SECRETARY OF STATE
TALLAHASSEE, FL

2020 JUL 24 AM 9:04

FILED

2020 JUL 24 PM 1:47

2020 JUL 24

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

M & L KALAF INC.

Signature

Requested by: SETH

07/24/20

Name

Date

Time

Walk-In

Will Pick Up

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC I or 3 File _____
- ___ UCC II Search _____
- ___ UCC II Retrieval _____
- ___ Courier _____

COVER LETTER

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

SUBJECT: M & L Khalaf 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: Marwan Khalaf
Name (Printed or typed)

6924 Redbay Dr.
Address

Brooksville, FL 34602
City, State & Zip

901-468-7008
Daytime Telephone number

naz.borachi.FL@gmail.com
E-mail address: (to be used for future annual report notification)

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

FILED

ARTICLES OF INCORPORATION

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

2020 JUL 24 AM 9:04

ARTICLE I NAME

The name of the corporation shall be: M & L Khalaf Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

100 Ponce De Leon Blvd.
Brooksville, FL 34601

SECRETARY OF STATE
TALLAHASSEE, FL

Mailing address, if different is:

6924 Redbay Dr.
Brooksville, FL 34601

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: P - Marwan Khalaf

Name and Title: _____

Address 6924 Redbay Dr.

Address: _____

Brooksville, FL 34602

Name and Title: VP - Layth Khalaf

Name and Title: _____

Address 6924 Redbay Dr.

Address: _____

Brooksville, FL 34602

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Marwan Khalaf
Address: 6924 Redbay Dr.
Brooksville, FL 34602

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Marwan Khalaf
Address: 6924 Redbay Dr.
Brooksville, FL 34602

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TALLAHASSEE, FL

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

Marwan Khalaf
Required Signature/Registered Agent

7/17/2020
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in this document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Marwan Khalaf
Required Signature/Incorporator

7/17/2020
Date