

P 2000089151
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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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

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

Email Address: AFZALHOSSAIN95@HOTMAIL.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION
BISMILLAH 21 INC**

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

2020 NOV 11 PM 12:25

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COVER LETTER

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

SUBJECT: BISMILLAH 21 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	☐ \$87.50	Filing Fee,
	& Certificate of Status		& Certified Copy		Certified Copy
					Status
ADDITIONAL COPY REQUIRED					

FROM: MOHAMMAD A. HOSSAIN

Name (Printed or typed)

4701 NW 14TH STREET

Address

LAUDRHILL, FL 33133

City, State & Zip

954-200-1383

Daytime Telephone number

afzalhossain95@hotmail.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)

ARTICLE I NAME

The name of the corporation shall be: BISMILLAH 21 INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4701 NW 14TH STREET
LAUDERHILL, FL 33313

4701 NW 14TH STREET
LAUDERHILL, FL 33313

ARTICLE III PURPOSE

ANY AND ALL LAWFUL BUSINESS
The purpose for which the corporation is organized is:

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

SAVED ULLAH - VPDT	MOHAMMAD A. HOSSAIN - PD
Name and Title:	Name and Title:
309 SW 78TH AVE	11195 NW 21ST PLACE
Address:	Address:
N. LAUDERDALE, FL 33068	CORAL SPRINGS, FL 33071
Name and Title:	Name and Title:
MUNIMUL MUNTAKIM - VPDS	4702 NW 50TH CT
Name and Title:	Address:
	TAMARAC, FL 33319
Name and Title:	Name and Title:
Address:	Address:

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Name and Title: _____
Address: _____
Address: _____
Name and Title: _____

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MOHAMMAD A. HOSSAIN
Address: 11195 NW 21ST PLACE
CORAL SPRINGS, FL 33071

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: MOHAMMAD A. HOSSAIN
Address: 11195 NW 21ST PLACE
CORAL SPRINGS, FL 33071

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 inscribed 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
Date: 11/17/2020

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
Date: 11/17/2020