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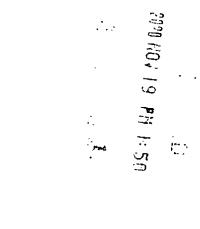
	(Requestor's Name)			
	(Address)			
	(Address)			
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	(City/State/Zip/Phone #)			
_	P WAIT	MAIL		
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Sta	itus		
Special Instructions to Filing Officer:				
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C RICO TO THE PROPERTY OF THE

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

Medal Gasoline Inc				
		-		
				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 Status
		•		Certificate of Fictitious Name
				Corp Record Search
				Officer Search
		ļ		Fictitious Search
2:				Fictitious Owner Search
Signature				Vehicle Search
				Driving Record
Requested by: SETH				UCC 1 or 3 File
	_ 11/18/20			UCC 11 Search
Name	Date	Time		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier
172 Pander's Printing - Thomiseville, GA 8/0	C		i	

COVER LETTER

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

SUBJECT: ///	(PROPOSED CORPORA	16. /NE.	
	(PROPOSED CORPORA	TE NAME - <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM: <u>/</u>	ALI SITAHBAZ Namo	e (Printed or typed)	
	2115 S ORANG		TLAIL_
	APOPKA FL.	3 2 7 0 3 State & Zip	
	6 31 - 310 - 86 Daytime T		
	E-mail address: (to be used		1
	2 man address. (10 0c tisci	a roi rature amidai report n	ourication)

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)

The name of the corporation shall be: MEDAL CA	SOLINE INC
ARTICLE II PRINCIPAL OFFICE Principal street address SISSONI TEAL APOPICA FL 32703	Mailing address, if different is: 2115 S CRANGE BLOSSON TRA APCRICA FL 32703
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	AND LAWFUL BUSINESS
ARTICLE IV SHARES The number of shares of stock is: / UC)	2820 NOV 19
Name and Title: ALI SHAFIBA 2 (F)	
Address 2115 5 CRANIC BLUSOM TRAIL AACIKA FL 32703	7 Address:
Name and Title:	
Address	
Name and Title:	Name and Title:
Address	

. Name and	Title:	Name and Title:	
Address		Address:	
ARTICLE VI RI The name and Flor	EGISTERED AGENT ida street address (P.O. Box NOT ac	reentable) of the registered gases is:	
Name:	ALI SHAHBAZ		
Address:	2115 5 ORA-NICE APOPICA FL 32	BLOSSON TRAIL	
-	APOPICA FL 32	703	
<u>ARTICLE VII IN</u>	SCORPORATOR		
The name and add	ress of the Incorporator is:		
Name:	ALI SHAMBAT		
Address:	ALI SHAHBAT 2115 S CRANG	EBLOSON TRAIL	
	ATOPICA FL 3	<u>2703</u>	
ARTICLE VIII E	FFECTIVE DATE:		
Effective date, if of (If an effective dat filing.)	her than the date of filing: e is listed, the date must be specific	and cannot be more than five da	IAL) ys prior or 90 days after the
Note: If the date in the document's effe	serted in this block does not meet the ctive date on the Department of State	applicable statutory filing requirences records.	nents, this date will not be listed as
Having been namea certificate, I am fan	as registered agent to accept service (ailiar with and accept the appointmen	of process for the above stated corpo t as registered agent and agree to ac	ration at the place designated in thi. It in this capacity
LA.	A-C'		11/19/20 20
	Required Signature/Registered	Agent	11/19/20 20 Date
I submit this docum	nent and affirm that the facts stated purtment of State constitutes a third d	herein are true. I am aware that to	he false information submitted in a
J. t.	AC:	egree jetony as provided for in \$.81 ;	1 ,
Required Signature	Incorporator		Date 11/19/2020