## P21000002654

(Requestor's Name)
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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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2021 JAN 14 PH 1: 34 SECRETARY OF STAT

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FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

Business Name & Docume	(OFFICE USE ONLY) nt Number, (if known):
1. Aurum Nutrition INC	
Name	Document Number (if known)
_x_ Walk in	Will wait
Certified Copy of the Ar Certificate of Status	ticles of Organization
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication X INC OTHER	Amendment Resignation of R.A. Officer/Director Change of Registered Agent Dissolution/Withdrawal Conversion Merger
Offick	
OTHER FILINGS	<u>REGISTRATION/OUALIFICATIONS</u>
Annual Report	Foreign FilingLimited PartnershipReinstatement
Statement of Authority	Trademark
APOSTIL ()COUN	Other
	EXAMINER'S INITIALS:

## **COVER LETTER**

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

SUBJECT:	Aurum Nutrition INC				
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)					
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a check for:		
🛭 \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee. Certified Copy & Certificate of		
		ADDITIONAL CO	Status		
FROM:	Mohammed Alammari Nam	e (Printed or typed)			
1	0007 Palma Linda Way				
<u></u>		Address			
	Orlando, FL 32836	. State & Zip			
	City	. State & Zip			
_(4	407) 722-9095 Daytime	relephone number	<del></del>		
	Moaliamazon@gmail.com E-mail address: (to be use	d for future annual report r	iotification)		

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)

	RTICLE II PRINCIPAL OFFICE Principal street address Mail			lailing address, if different is:		
10007 Palma Linda V	<del></del>			<del>-</del>		
Orlando, FL 32936						
ARTICLE III PURPOS The purpose for which the	e corporation is organized is:			SECRETORS CONSTA	2021 JAN 14 PM 1: 3	
		-		——————————————————————————————————————	. <u></u>	
The number of shares of st	<u>S</u> ock is: 1.000					
The number of shares of sto  ARTICLE V INITIAL  Name and Title:  Address	ock is: 1.000  OFFICERS AND/OR DIRECTORS  Mohamed Alammari - Director  10007 Palma Linda Way Apt 220	<del>_</del>	:			
The number of shares of sto  ARTICLE V INITIAL  Name and Title:  Address	ock is: 1.000  OFFICERS AND/OR DIRECTORS  Mohamed Alammari - Director	<del>_</del>				
The number of shares of so  ARTICLE V INITIAL  Name and Title:  Address	ock is: 1.000  OFFICERS AND/OR DIRECTORS  Mohamed Alammari - Director  10007 Palma Linda Way Apt 220	Address: 				
The number of shares of states.  **ARTICLE V INITIAL**  Name and Title:  Address  Name and Title:	ock is: 1.000  OFFICERS AND/OR DIRECTORS  Mohamed Alammari - Director  10007 Palma Linda Way Apt 220  Orlando, FL 32836	Address:  Name and Title				
The number of shares of social ARTICLE V INITIAL  Name and Title:  Address  Name and Title:	ock is: 1.000  OFFICERS AND/OR DIRECTORS  Mohamed Alammari - Director  10007 Palma Linda Way Apt 229  Orlando, FL 32836	Address: Name and Title Address:				
The number of shares of social ARTICLE F INITIAL  Name and Title:  Address  Name and Title:  Address	ock is: 1.000  OFFICERS AND/OR DIRECTORS  Mohamed Alammari - Director  10007 Palma Linda Way Apt 220  Orlando, FL 32836	Address: Name and Title Address:				

Name a	nd Title:	Name and Title:	<del></del>		
. S Addres	s	Address:		-	
					<del></del>
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable)	of the registered agent is:			
Name:	Mohamed Alammari	_			
Address:	10007 Palma Linda Way Apt 220	_			
	Orlando, FL 32836	_ <del></del>	S	r <u>a</u>	
<u>ARTICLE VII</u>	INCORPORATOR		EOREIA O SE STAI TALLMHASTEE, FL	2021 JAN 14	1
The name and a	address of the Incorporator is:		77.77 13.24	<u>t-</u>	:
Name:	Mohamed Alammari	<del></del>		PH	e de la compa
Address:	10007 Palma Linda Way Apt 220		SES	PH 1: 34	
	Orlando, FL 32836		Lij.	Ť.	
Effective date, i (If an effective filing.)  Note: If the date	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and can te inserted in this block does not meet the applicable effective date on the Department of State's record	not be more than five days prior or be be more than five days prior or be be because the statutory filing requirements, this days			ed as
Having been na certificate, I am	med as registered agent to accept service of process familiar with and accept the appointment as regis	s for the above stated corporation at the tered agent and agree to act in this cap	<sup>,</sup> place desiţ acity	gnated i	n this
Moliamed Ala	ammari		/14/2021		
	Required Signature/Registered Agent		Date		
I submit this do document to the	ocument and affirm that the facts stated herein a Department of State constitutes a third degree felo	re true. I am aware that the false info ony as provided for in s.81",155, F.S.	ormation si	ubmitted	l in a
Mohamed Al	amman	1/	14/2021		
	ture/Incorporator	Date			