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DATE: 3/9/2021

NAME: Y & D GROUP CORP.

TYPE OF FILING: ARTICLES

COST: 78.75

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE *Abbie Hodge*

COVER LETTER

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

SUBJECT: Y & D Group Corp.
(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: Arnaud Meirhaeghe
Name (Printed or typed)

282 Harmony Drive
Address

Massapequa Park NY 11762
City, State & Zip

516-795-0212
Daytime Telephone number

arnaud@salac128.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: Y & D Group Corp.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

1200 West Avenue 1505
Miami FL 33139

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Fast Food

ARTICLE IV SHARES

The number of shares of stock is: 200

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Djamal Zoughbi Pres. Name and Title: _____

Address 1200 West Avenue 1505 Address: _____

Miami FL 33139 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: Djamel Zoughbi
Address: 1200 West Avenue 1505
Miami FL 33139

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Arnaud Meirhaeghe
Address: 282 Harmony Drive
Massapequa Park NY 11762

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

DocuSigned by: Djamel Zoughbi 03/03/2021
Required Signature/Registered Agent 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.

[Signature] 03/03/2021
Required Signature/Incorporator Date