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





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7022 FEB 28 AM 9: 33 SECRUTARY OF STATE TALLAHASSEE, FLORIDA

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TALLA STEFFLORIDA

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COVER LETTER

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

SUBJECT: ZTA	AA ENTERPRISES, INC		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE ŞUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:
⊠ \$70.00 Filing Fec	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REOUIRED
	MD Zakasi	a Rahman Tuhin	
FROM:		e (Printed or typed)	
_	601	N 65th Way Address	
		ood, FL. 33024 , State & Zip	
_		-707-2540 Telephone number	
		s@gmail.com	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)

naicie ii poi	NCIDAL OFFICE		
601 N 65th Way, Ho	Principal street address	Mailing add	ress, if different is:
bu i N obth Way, Ho	IIYWOOD, FL. 33024		
	POSE h the corporation is organized is:The transfunder the state of Florida.	saction of any or all lawful busing	ess for which corporations
			2022 F
			HASS
ARTICLE IV SHA			SEE.F
	TIAL OFFICERS AND/OR DIRECTORS		2 FEB 28 AM 9: 33 CRETARY OF STATE LAHASSEE, FLORIDA
Name and T	itle: MD Zakaria Rahman Tuhin, CEO	Name and Title:	
Address	601 N 65TH WAY	Address:	
	HOLLYWOOD, FL. 33024	_	
Name and Ti	tle:	Name and Title:	
Address			
Name and Ti	tle:		
Address			

Name a	ind Title:	Name and Title:	
Addre	ss	Address:	
			
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptabl	e) of the registered agent is:	
Name:	MD Zakaria Rahman Tuhin		
Address:	601 N 65th Way		
	Hollywood, FL. 33024	<u>Ά</u> υ.	2207
ARTICLE VII	<u>INCORPORATOR</u>	ECRETARY OF STAF LAHASSEE, FLORI	22 1 15 7
The <u>name and</u>	address of the Incorporator is:	SSEE	0.7
Name:	MD Zakaria Rahman Tuhin	——————————————————————————————————————	Д П
Address:	601 N 65th Way	——————————————————————————————————————	ي بي
	Hollywood, FL. 33024	·	· ·
ARTICLE VIII	EFFECTIVE DATE:		
Effective date.	if other than the date of filing: 02/22/2022	. (OPTIONAL) innot be more than five days prior or 90 days a	ifter
	te inserted in this block does not meet the applic effective date on the Department of State's reco	able statutory filing requirements, this date will n	ot be
	amed as registered agent to accept service of processing familiar with and accept the appointment as reg	ess for the above stated corporation at the place de istered agent and agree to act in this capacity	signa
	Marie	<u>ο</u> 22-22-2	۲2
	Required Signature/Registered Agent	Da	te
	ocument and affirm that the facts stated herein e Department of State constitutes a third degree f	are true. I am aware that the false information elony as provided for in s.817.155, F.S.	subm
	ture/Incorporation		