

**P22000019240**

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 : AJ ACCOUNTING SERVICES, INC.  
Account Number : I201100000892  
Phone : (305)448-9584  
Fax Number : (305)448-9569

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
RAZ GLOBAL SERVICES INC**

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

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**COVER LETTER**

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

**SUBJECT:** RAZ GLOBAL SERVICES, 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  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** IMRAN HAKEEM

Name (Printed or typed)

3110 N. PINE ISLAND RD UNIT 105

Address

SUNRISE, FL 33351

City, State & Zip

305-448-9584

Daytime Telephone number

JABBOURANDASSOCIATES@GMAIL.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: RAZ GLOBAL SERVICES, INC**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address  
3110 N. PINE ISLAND RD UNIT 105  
SUNRISE, FL 33351Mailing address, if different is:  
3110 N. PINE ISLAND RD UNIT 105  
SUNRISE, FL 33351**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ALL LAWFUL PURPOSES**ARTICLE IV SHARES** 1000

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: IMRAN HAKEEM, PDAddress 3110 N. PINE ISLAND RD UNIT 105  
SUNRISE, FL 33351Name and Title: RUMAN HAKEEM, VPAddress: 3110 N. PINE ISLAND RD UNIT 105  
SUNRISE, FL 33351

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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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: IMRAN HAKEEM  
 Address: 3110 N. PINE ISLAND RD UNIT 105  
SUNRISE, FL 33351

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: IMRAN HAKEEM  
 Address: 3110 N. PINE ISLAND RD UNIT 105  
SUNRISE, FL 33351

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**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*

Imran Hakeem 03/14/2022  
 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.*

Imran Hakeem 03/14/2022  
 Required Signature/Incorporator Date