

P22000032927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

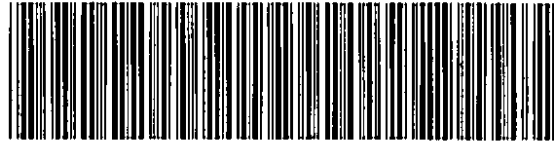
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700387911027

05/04/22--01012--013 ++70.00

S. CHATHAM
MAY 20 2022

22 MAY -4 AM 3:25
SECTION OF PROCEEDINGS

COVER LETTER

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

SUBJECT: 3A Family, 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: Brett Isaac
Name (Printed or typed)

2151 university Blvd S
Address

Jacksonville, FL 32216
City, State & Zip

904-742-2388
Daytime Telephone number

Brett@Isaac
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

FILED
DIVISION OF CORPORATIONS
22 MAY -4 AM 3:25

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: 3A Family, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10675 Atlantic Blvd.
Jacksonville, FL 32225

same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Convenience store

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tiqist Kidane - President

Address 10675 Atlantic Blvd.
Jacksonville, FL
32225

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

22 MAY - 4 AM 3:25
DIVISION OF CORPORATIONS

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: Tigist Kidane
Address: 10675 Atlantic Blvd
Jacksonville, FL 32225

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Brett Isaac
Address: 2151 University Blvd.
Jacksonville, FL 32216

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

P. Tigist Kidane
Required Signature/Registered Agent

05/03/2022
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.

Brett Isaac
Required Signature/Incorporator

5/3/2022
Date

22 MAY -4 AM 3:25
DIVISION OF CORPORATIONS