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(((H220001737693)))



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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : SETH Z JOSEPH, P.A.

Account Number : 120220000035 : (305)445-5383 Phone : (305)445-5384 Fax Number

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

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FLORIDA PROFIT/NON PROFIT CORPORATION CHARKU MIAMI, INC.

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

Principal street address 801 Brickell Bay Dr., Unit 4-c-042 Miami, FL 33131		Mailing address, if different	is:
		801 Brickell Bay Dr., Unit	4-c-042
		Miami, FL 33131	
RTICLE III PURPO)SE		
he purpose for which t	he corporation is organized is: Any I	awful purpose.	
_			
•			
			
•			
RTICLE IV SHAR	ES 10,000		
he number of shares of	stock is: 10,000		
OTICLE I/ INTL	ι Απετέρες ΑΝΠΑΊΟ ΠΙΒΕΓΤΑΙΡΟ		
	L OFFICERS AND/OR DIRECTORS		
Name and Title	KAMAL AZZOUZ, Pres. & Dir.	Name and Title:	
Address	801 Brickell Bay Dr., Unit 4-c-042	Address:	
	Miami, FL 33131		
Name and Title:		Name and Title:	
Address			
Addiess		Address:	
Addiess		Address:	
Addiess		Address:	
Addivas		Address:	
		Name and Title:	
		Name and Title:	7
Name and Title		Name and Title:	F
Name and Title		Name and Title:	
Name and Title		Name and Title:	

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Name and	f Title:	Name and Title:			
Address		Address:			
	REGISTERED AGENT orlda street address (P.O. Box NOT acceptable) of	the registered agent is:			
Чалт е:	KAMAL AZZOUZ				
.ddress:	801 Brickell Bay Dr., Unit 4-c-042				
	Miami, FL 33131				
RTICLE VII	INCORPORATOR				
w name and ad	dress of the Incorporator is:				
Name:	KAMAL AZZOUZ				
Address:	801 Brickell Bay Dr., Unit 4-c-042				
	Miani, FL 33131				
	inserted in this block does not meet the applicable fective date on the Dopartment of State's records.	statutory filing requirements, I	his date v	roa lliv	t be listed
	of corresponding and accept service of process for filler with and accept the appointment as registere				gnated in t
· />			MAJ	//	2000
	Required Signature/Registered Agent		****	Date	2023
submit this dec	thent and affirm that the facts stated herein are in	true. I am aware that the fils as provided for in 2.817.155, i	e informa F.S.	nion si	ubmitted i
<u> </u>			MAY	16	2012
equired Signatu	reducorporator	Date	<u></u> ,		5.5 9.5 9.5 9.5 9.5 9.5 9.5 9.5 9.5 9.5
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