

P22000067313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

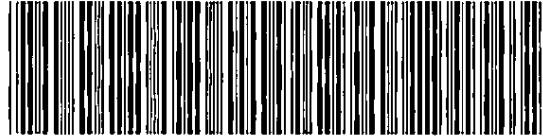
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S. CHATHAM  
AUG 29 2022

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
22 AUG 29 PM 3:38

2022 AUG 29 PM 1:17  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

**PICK UP:** 8/29 DANNY

**XX CERTIFIED COPY** \_\_\_\_\_

**PHOTOCOPY** \_\_\_\_\_

**CUS** \_\_\_\_\_

**XX FILING**

**INC** \_\_\_\_\_

**1. A2J, CORPORATION**

(CORPORATE NAME AND DOCUMENT #)

**2.**

(CORPORATE NAME AND DOCUMENT #)

**3.**

(CORPORATE NAME AND DOCUMENT #)

**4.**

(CORPORATE NAME AND DOCUMENT #)

**5.**

(CORPORATE NAME AND DOCUMENT #)

**6.**

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## COVER LETTER

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

SUBJECT: A2J, Corporation

(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: Mitra Hooman

Name (Printed or typed)

2650 Lake Shore Drive, Unit 2103

Address

Riviera Beach, Florida 33404

City, State & Zip

631-418-7592

Daytime Telephone number

mitra@simpleforce.pro

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)

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**ARTICLE I NAME**

The name of the corporation shall be: A2J, Corporation

**ARTICLE II PRINCIPAL OFFICE**

Principal **street** address

Mailing address, if different is:

2650 Lake Shore Drive, Unit 2103

Riviera Beach, Florida 33404

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to engage in any lawful act or activity for which a corporation may be organized under the Florida Business Corporation Act.

**ARTICLE IV SHARES**

The number of shares of stock is: 10,000 shares of Common Stock; \$0.01 par value

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Mitra Hooman, Director

Name and Title: Mitra Hooman, President and CEO

Address 2650 Lake Shore Drive, Unit 2103

Address: 2650 Lake Shore Drive, Unit 2103

Riviera Beach, Florida 33404

Riviera Beach, Florida 33404

Name and Title: Mitra Hooman, Chief Financial Officer

Name and Title: Mitra Hooman, Secretary

Address 2650 Lake Shore Drive, Unit 2103

Address: 2650 Lake Shore Drive, Unit 2103

Riviera Beach, Florida 33404

Riviera Beach, Florida 33404

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: Shawn Birken, Esq.  
Address: 2727 NW 62nd Street  
Fort Lauderdale, Florida 33309

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Mitra Hooman  
Address: 2650 Lake Shore Drive, Unit 2103  
Riviera Beach, Florida 33404

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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*

\_\_\_\_\_  
Required Signature/Registered Agent

8/26/22  
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.*

\_\_\_\_\_  
Required Signature/Incorporator

8/25/2022  
Date