## P23000003444

| (Requestor's Name)                   |
|--------------------------------------|
| (Address)                            |
| (Address)                            |
| (City/State/Zip/Phone #)             |
| PICK-UP WAIT MAIL                    |
| (Business Entity Name)               |
| (Document Number)                    |
| ed Copies Certificates of Status     |
| cial Instructions to Filing Officer. |
|                                      |
|                                      |
|                                      |
|                                      |

Office Use Only



000398239840

S. CHATHAM

DIVISION OF COLFORGIUM P

01/18/23--01009--030 \*\*70.00

CD

## **COVER LETTER**

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

| SUBJECT: 2601 N         | fobil Truck Stop Inc.                        |                                       |                         |
|-------------------------|--|---------------------------------------|-------------------------|
|                         | (PROPOSED CORPOR/                            | ATE NAME - MUST INCL                  | UDE SUFFIX)             |
| Enclosed are an ori     | ginal and one (1) copy of the art            | ticles of incorporation and           | l a check for:          |
| ■ \$70.00<br>Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | □ \$78.75 Filing Fee & Certified Copy | & Certificate of Status |
|                         |  | ADDITIONAL CO                         | PY REQUIRED             |
| FROM;                   |  | e (Printed or typed)                  |                         |
|                         | 01 N. 50th St.                               |                                       |                         |
| Ta                      | mpa, FL 33619                                | Address                               |                         |
| <del></del>             | City,  | State & Zip                           |                         |
| 914                     | 4-425-5465                                   |                                       |                         |
|                         | Daytime 'I                                   | 'elephone number                      | ·                       |
| naz.                    | borachi.fl@gmail.com                         |                                       |                         |
|                         | E-mail address: (to be use                   | d for future annual report n          | otification)            |

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

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| .601 MOBIL TRUCI          | K STOP INC.  |             |             |                                |
|---------------------------|--------------|-------------|-------------|--------------------------------|
|                           | <u> </u>     |             |             |                                |
|                           |              |             |             |                                |
|                           |              |             | <del></del> |                                |
|                           |              |             |             | Art of Inc. File               |
|                           |              |             |             | LTD Partnership File           |
|                           |              |             |             | Foreign Corp. File             |
|                           |              |             |             | L.C. File                      |
|                           |              |             |             | Fictitious Name File           |
|                           |              |             |             | Trade/Service Mark             |
|                           |              | ,           |             | Merger File                    |
|                           |              |             |             | Art, of Amend. File            |
|                           |              |             |             | RA Resignation                 |
|                           |              |             |             | Dissolution / Withdrawal       |
|                           |              |             |             | Annual Report / Reinstatement  |
|                           |              |             |             | Cert. Copy                     |
|                           |              | ĺ           |             | Photo Copy                     |
|                           |              |             |             | Certificate of Good Standing   |
|                           |              |             |             | Certificate of Status          |
|                           |              |             |             | Certificate of Fictitious Name |
|                           |              |             | <u> </u>    | Corp Record Search             |
|                           |              |             |             | Officer Search                 |
|                           |              |             |             | Fictitious Search              |
| Signature                 | <del>_</del> |             |             | Fictitious Owner Search        |
| ·                         |              |             |             | Vehicle Search                 |
|                           |              |             |             | Driving Record                 |
| Requested by: SETH        |              |             |             | UCC 1 or 3 File                |
| Nama                      | Data         | Time        |             | UCC 11 Search                  |
| Name                      | Date         | THIC        |             | UCC    Retrieval               |
| Walk-In Thomselve GA Arcc | Will Pick Up | <del></del> |             | Courier                        |

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

| no mano or the corpora                | tion shall be: 2601 Mobil Truck Stop I     |                               |           |
|---------------------------------------|--|-------------------------------|-----------|
| RTICLE II PRINC                       | CIPAL OFFICE                               |                               |           |
| SCOLNI COLL OL                        | Principal street address                   | Mailing address, if diffe     | erent is: |
| 2601 N. 50th St.                      |  | same                          |           |
| Tampa, FL 33619                       |  | -                             |           |
| ARTICLE III PURPO                     | OSE he corporation is organized is:  Any & | all lawful business practices | No. 1     |
|                                       |  |                               | 35.       |
|                                       |  |                               |           |
| · · · · · · · · · · · · · · · · · · · |  |                               |           |
|                                       |  |                               | 72        |
|                                       |  |                               | 1         |
|                                       |  |                               |           |
|                                       |  |                               |           |
|                                       |  |                               |           |
| ARTICLE IV SHARE                      | es   |                               |           |
| The number of shares of               | stock is:                                  |                               |           |
|                                       | ·  |                               |           |
| ARTICLE V INITIA                      | <u>L OFFICERS AND/OR DIRECTORS</u>         |                               |           |
| Name and Title                        | Muhammad Samad - President                 | Name and Title:               |           |
| Address                               | 2601 N. 50th St.                           | Address:                      | •         |
|                                       | Tampa, FL 33619                            |                               | <u></u>   |
|                                       |  | <del></del>                   |           |
|                                       |  |                               |           |
| Name and Older                        |  |                               |           |
| Name and Title:                       |  | Name and Title:               |           |
| Address                               | ·  | Address:                      | •         |
|                                       |  |                               |           |
|                                       |  |                               |           |
|                                       | <u> </u>                                   |                               |           |
| Name and Tiste.                       |  |                               |           |
|                                       |  | Name and Title:               |           |
| Address .                             |  | Address:                      |           |
|                                       |  |                               |           |
| •                                     |  |                               |           |
|                                       |  |                               |           |

| inathe an                           | d Title:   | Name and Title:                         |   |
|-------------------------------------|--|---|---|
| Address                             |  | _ Address:                              |   |
|                                     |  |   |   |
|                                     |  |   |   |
|                                     |  |   |   |
|                                     |  |   | 5) B  |
| ARTICLE VI                          | REGISTERED AGENT   |   | J. S. J. S. W. S. |
| The <u>name and F</u>               | lorida street address (P.O. Box NOT acceptable)  | of the registered agent is:             | HAT.  |
| Name:                               | Muhammad Samad   | _                                       | <b>一</b> 第3   |
| Address:                            | 2601 N. 50th St.   | <del>_</del>                            |   |
|                                     | Tampa, FL 33619  |   | 6   |
|                                     |  | _                                       | £   |
| ARTICILE VII                        | INCORPORATOR   |   |   |
| ·                                   | ddress of the Incorporator is:   |   |   |
| \ <u></u>                           | Muhammad Samad   |   |   |
| Name:                               |  |   |   |
| Address:                            | 2601 N. 50th St.   | _                                       |   |
|                                     | Tampa, FL 33619  |   |   |
|                                     |  |   |   |
| 1100                                | EFFECTIVE DATE: if other than the date of filing:  | . (OPTIONAL)                            |   |
| (If an effective filing.)           | date is listed, the date must be specific and can  | not be more than five days prior o      | r 90 days after the   |
| = :                                 | te inserted in this block does not meet the applicat   | ole statutory filing requirements, this | date will not be listed as  |
| the document's                      | effective date on the Department of State's record   | ds.                                     |   |
|                                     | amed as registered agent to accept service of proces   | e for the above stated cornoration at   | the place designated in th  |
| Having been no<br>certificate, I an | amed as registerea agent to accept service of proces<br>n familiar with and accept the appointment as regis              | tered agent and agree to act in this c  | apacity   |
|                                     |  |   | ·   |
| •                                   | MUHTIMAD SAMAD Required Signature/Registered Agent   |   | 1/13/2023<br>Date   |
|                                     |  | was a standard for the                  |   |
|                                     |  | re true. I am aware that the Jaise to   | njormanon suomineu m  |
| I submit this a                     | ocument and affirm that the facts stated herein a<br>e Department of State constitutes a third degree fe                 | lony as provided for in 8.817.155, E.S  | •   |
| I submit this a<br>document to th   | ocument and affirm that the facts stated herein to be Department of State constitutes a third degree fet MU HAT MAY SAND | ony as provided for in 8.817.155, F.S   | 1/11/2023   |