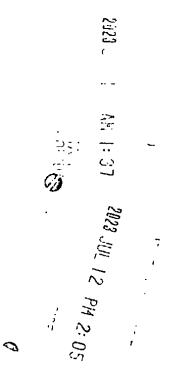
P23000052275

| | (Requestor's Name) | _ |
|-------------------------|--------------------------|--|
| | | |
| | (Address) | |
| | (//00/633) | |
| | | |
| | (Address) | |
| | | |
| | | |
| | (City/State/Zip/Phone #) | |
| | | |
| PICK-UP | WAIT | MAIL |
| | | |
| | | |
| | (Business Entity Name) | |
| | | |
| | (Document Number) | |
| | (Document Number) | |
| | | |
| Certified Copies | _ Certificates of | Status |
| | | |
| | | |
| Special Instructions to | Filing Officer: | |
| · | · | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | <u>. </u> |
| J | | |

Office Use Only



400411828544



FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

07/12/23

NAME: ARGAL USA INC

TYPE OF FILING: ARTICLES

COST:

70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

スプ



Division of Corporations

July 12, 2023

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: ARGAL USA INC Ref. Number: W23000095758

We have received your document for ARGAL USA INC. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P98000105070.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Karen Lovelace Regulatory Specialist II

Letter Number: 223A00015509

Nuese Keep Digital
Thurl Cyal.

FLORIDA

www.sunbiz.org

COVER LETTER

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

| SUBJECT: | Argal-USA Inc | Argal Restaurant S | Supplies USA |
|-------------------------|--|---|-------------------------|
| | (PROPOSED CORPOR | ATENAME MUST INCL | UDE SUFFIX) |
| Enclosed are an orig | ginal and one (1) copy of the a | ticles of incorporation and | a check for: |
| □ \$70.00 Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | ☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | & Certificate of Status |
| FROM: | Orlee Arfi | | |
| | Nam 16650 NE 35th | ae (Printed or typed) ave | |
| • | North miomi h | Address | |
| _ | | each FL 33160 State & Zip | |
| | 305610444 | | |
| | Mike@argalco | Telephone number O.COM ed for future annual report no | otification) |
| | E man address, to be use | o for fature annual report ne | otification) |

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 corpora | | A-Inc- Argal Restau | rant Supplies USA |
|--|--|--------------------------------|------------------------|
| ARTICLE II PRINC | | | |
| 900 Park Centi | Principal street address re Bivd Unit 400-D | _ | ress, if different is: |
| | | <u> 16650 Ni</u> | 35th ave |
| Miami FL 3310 | 39 | North mian | ni beach FL 33160 |
| ARTICLE III PURPO The purpose for which t | OSE he corporation is organized is: | | |
| Wholesale re | estaurant hotel bar nigh | ntclubs supplies | |
| | | | |
| | | | |
| | | | |
| | <u>ES</u> stock is: | | |
| Name and Title | Orlee Arfi President | Name and Title: | |
| Address | 900 Park Centre Blvd Un | sit 400-D | |
| | Miami FL 33169 | | |
| | | | |
| | | _ | |
| Name and Title: | | Name and Title: | |
| Address | | Address: | |
| | | | |
| | | | |
| | | | ~ |
| Name and Title: | | Name and Title: | 2923 |
| Address | | | - |
| | | nuu coo. | - |
| | | | حبتہ کات |
| | | | |
| | | | - 35 Β ω |

| Name and Title: | | Name and Title: | |
|---|---|--|---------------------------------------|
| . Address | | | |
| | | | |
| | | | |
| | | | |
| TICLE VI I | REGISTERED AGENT | | |
| name and Flo | orida street address (P.O. Box NOT acceptable) | of the registered agent is: | |
| me: | Orlee Arfi | _ | |
| dress: | 16650 NE 35th ave | _ | |
| | North miami beach FL 33160 | _ | |
| TICLE VII I | NCORPORATOR | | |
| name and add | dress of the Incorporator is: | | |
| Same: | Orlee Arfi | | |
| Address: | 16650 NE 35th ave | _ | |
| | North miami beach FL 331 | - | |
| ing been name | nserted in this block does not meet the applicable cetive date on the Department of State's records das registered agent to accept service of process j | The the above stated cornovation | nn at the place desirement in |
| rtificate, I am familiar with and accept the appointment as | | red agent and agree to act in t | this capacity |
| | Required Signature/Registered Agent | | 7/11/23 |
| omit this docu | _ | Anna I ann an Aireil e | Date |
| ment to the De | ment and affirm that the facts stated herein are partitions of State constitutes a third degree felon | rrue. I am aware that the Ja y as provided for in s.817.155 | ilse information submitted in F.S. |
| | In al | | 7/11/23 |
| nired Signature | /Incorporator | Da | |
| | | | R. S. |
| | | | (2) (2) |
| | | | વેટ્સ 🔾 |
| | | | (1) 22 Co. 1 |
| | | | |
| | | | DES COLL AND 1:37 |
| | | | 0.15.1 (1) |