

P24000002260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

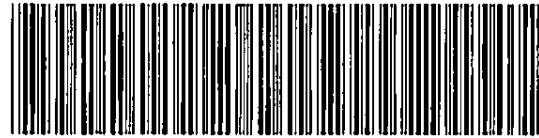
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DIVISION OF REVENUE
TAXPAYER SERVICES
2024

COVER LETTER

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

SUBJECT: HAZEL SKY 2 TALLAHASSEE 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 ☐ \$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: RAED HAIFA
Name (Printed or typed)

2910 KERRY FOREST PKWY
Address

TALLAHASSEE, FL 32309
City, State & Zip

850-345-3837
Daytime Telephone number

RHAIFA86@YAHOO.COM
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)

ARTICLE I NAME

The name of the corporation shall be: HAZEL SKY 2 TALLAHASSEE INC

ARTICLE II PRINCIPAL OFFICE

Principal street address Mailing address, if different is:
2910 KERRY FOREST PKWY
TALLAHASSEE, FL 32309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: PROFIT

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	MAKRAM HIJAZ, VICE PRESIDENT	Name and Title:	RAED HAIFA, PRESIDENT
Address	9438 MARIPOSA PASS	Address:	7052 SAWLEY LANE
	SAN ANTONIO, TX 78251		TALLAHASSEE, FL 32317

Name and Title:		Name and Title:	
Address		Address:	

Name and Title:		Name and Title:	
Address		Address:	

2021
11
5:00

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: RAED HAIFA
Address: 7052 SAWLEY LANE
TALLAHASSEE, FL 32317

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RAED HAIFA
Address: 7052 SAWLEY LANE
TALLAHASSEE, FL 32317

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

Raed Haifa 1/12/2024
Required Signature/Registered Agent 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.

Raed Haifa 1/12/2024
Required Signature/Incorporator Date