

P24000037195

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : AJ ACCOUNTING SERVICES, INC.
Account Number : I20110000092
Phone : (305)448-9584
Fax Number : (305)448-9569

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
MOUAYAD TAKIDIN, PA

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

RECEIVED

2024 JUN -3 PM 12:21

DIVISION OF CORPORATIONS
AJ ACCOUNTING SERVICES

2024 JUN -3 PM 12:14

COVER LETTER

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

SUBJECT: MOUAYAD TAKIDIN, PA

(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: MOUAYAD TAKIDIN

Name (Printed or typed)

1223 EUCALYPTUS DRIVE

Address

HOLLYWOOD, FL 33021

City, State & Zip

(786) 889-1110

Daytime Telephone number

jabbourandassociates@gmail.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: MOUAYAD TAKIDIN, PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

1223 EUCALYPTUS DRIVE

HOLLYWOOD, FL 33021

Mailing address, if different is:

1223 EUCALYPTUS DRIVE

HOLLYWOOD, FL 33021

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE

ARTICLE IV SHARES

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: TAKIDIN, MOUAYAD, PD

Name and Title: _____

Address 1223 EUCALYPTUS DRIVE

Address: _____

HOLLYWOOD, FL 33021

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2024 JUN - 3 11:14

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: TAKIDIN, MOUAYAD
Address: 1223 EUCALYPTUS DRIVE
HOLLYWOOD, FL 33021

ARTICLE VII INCORPORATOR

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


Name: TAKIDIN, MOUAYAD
Address: 1223 EUCALYPTUS DRIVE
HOLLYWOOD, FL 33021

ARTICLE VIII EFFECTIVE DATE:

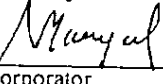
Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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:

 06/01/2024
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.

 06/01/2024
Required Signature/Incorporator Date