

P24000038534

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 : EXPRESS BUSINESS & TAX SERVICES INC
Account Number : I20220000138
Phone : (786)239-9353
Fax Number : (305)675-8465

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

Email Address: AIMET@EXPRESSTAXSVCS.COM

RECEIVED

2024 JUN -6 PM 1:04

CORPORATIONS
COMMERCIAL
SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION
BD FL PETROLEUM INC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$87.50

2024 JUN -6 AM 9:08

FILED

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Corporate Filing Menu

Help

COVER LETTER

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

SUBJECT: BD FL PETROLEUM 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: FAISAL AHMED
Name (Printed or typed)

6900 SW 8 ST
Address

MIAMI, FL 33144
City, State & Zip

305-900-9386
Daytime Telephone number

AIMET@EXPRESSTAXSVCS.COM
E-mail address: (to be used for future annual report notification)

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

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FL

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: BD FL PETROLEUM INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

6900 SW 8 ST
MIAMI, FL 33144

Mailing address, if different is:

6900 SW 8 ST
MIAMI, FL 33144

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: FAISAL AHMED - PD Name and Title:

Address: 4340 SW 74TH WAY Address:

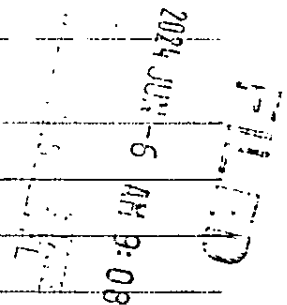
DAVIE, FL 33314

Name and Title: Name and Title:

Address: Address:

Name and Title: Name and Title:

Address: Address:



Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: FAISAL AHMED

Address: 4340 SW 74TH WAY

DAVIE, FL 33314

ARTICLE VII INCORPORATORThe name and address of the incorporator is:

Name: FAISAL AHMED

Address: 4340 SW 74TH WAY

DAVIE, FL 33314

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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 state corporation at the place designated in this certificate, I am familiar with and accept by appointment as registered agent and agree to act in this capacity

<u>Faisal Ahmed</u>	<u>06/06/2024</u>
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.

<u>Faisal Ahmed</u>	<u>06/06/2024</u>
Required Signature/Incorporator	Date