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PICK-UP WAIT MAIL			
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Certified Copies Certificates of Status			
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*• FLORIDA-CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

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AUTHORIZATION SIGNATURE: Alhafer Inc	- Jew Gull-
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Certified copies of:	
Certificate of Status	AMMENDMENTS 22
<u>NEW FILINGS</u>	AMMENDMENTS 2
Profit	Amendment
Not for Protit	Resignation of R.A. Officer/Director
XLimited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
LLLP	Conversion
INC	
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign Filing
Fictitious Name	Limited PartnershipReinstatement
APOSTIL ()	Trademark Other
Country	
	EXAMINER'S INITIALS:

FLORIDA-CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

PLEASE USE FUNDS FROM THIS ACC AUTHORIZATION SIGNATURE:	4 .
Alhafer Inc	- Jacob
BUSINESS (Name)	Document #
Walk in	Pick up time
Mail out	Will wait
Photocopy	
Certified copies of:	20
Certificate of Status	AMMENDMENTS 21
<u>NEW FILINGS</u>	AMMENDMENTS 33
Protit	Amendment
Not for Profit	Resignation of R.A. Officer/Director
XLimited Liability Domestication	Change of Registered Agent Dissolution/Withdrawal
Other	Merger
LLLP	Conversion
<u>INC</u> OTHER FILINGS	DECISTED ATION/OUT AT TELEVATIONS
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign Filing
Plant N	Limited Partnership
Fictitious Name	Reinstatement Trademark
APOSTIL ()	Other
Country	

EXAMINER'S INITIALS:_____

COVER LETTER

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

SUBJECT:	Alhafar Inc			
	(PROPOSED CORPORA	TE NAME ~ MUST INCL	UDE SUFFIX)	-
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:	
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED	
				~ .
FROM:	Brett Isaac	e (Printed or typed)		
	2151 University blvd S			
	Jacksonville, FL 32216	3	0.50 0.50 0.50	
	City,	State & Zip		
	904-730-9264			
	Daytime T	elephone number		
	E-mail address: (to be use	d for future annual report n	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)

The name of the corporati	on shall be: Alhafar Inc			
ARTICLE II PRINC 1 12553 N Main	RINCIPAL OFFICE Principal street address Main St		Mailing address, if different is:	
Jacksonville, F	FL 32218			
ARTICLE III PURPO. The purpose for which th	SE e corporation is organized is:	To Operate a Convenience		
ARTICLE IV SHARE. The number of shares of st ARTICLE V INITIAL	S ock is:1000 . OFFICERS AND/OR DIRECTO	<u>RS</u>	20:	
Name and Title:		Name and Title:	2024 JUH	
Address	9142 Upstream St	Address:		
-	Jacksonville, FL 32225			
Name and Title:_		Name and Title:	1.1.7	
Address _				
-				
Name and Title:_		Name and Title:		
Address _		Address:		
-				
_				

Name and	Title:	Name and Title:	
Address		Address:	
			
ARTICLE VI RI The name and Flor	<u>EGISTERED AGENT</u> ida street address (P.O. Box NOT acceptal	ole) of the registered agent is:	
Name:	Brett Isaac	or and cognition agent is.	
Address:	2151 University blvd S		
-	Jacksonville, FL 32216		
ARTICLE VII IN	<u> CORPORATOR</u>		20'
The name and add	ress of the incorporator is:		22 577
Name:	Brett Isaac		F1L1 2021, JUN 21,
Address:	2151 University blvd S		= m
	Jacksonville, FL 32216		<u> </u>
			9:1:7
ARTICLE VIII E	FFECTIVE DATE:		,
(If an effective date filing.)	ner than the date of filing:e is listed, the date must be specific and c	. (OPTIONAL) annot be more than five days prior or	90 days after the
Note: If the date in the document's effe	serted in this block does not meet the applicative date on the Department of State's reco	cable statutory filing requirements, this dords.	late will not be listed as
Having been named certificate, I am fam	as registered agent to accept service of prociling with dulf accept the appointment as reg		e place designated in this pacity
	Required Signature/Registered Agent		Date
I submit this document to the Dep	en and offirm that the facts stated herein artment of State constitutes a third degree f	are true. I am aware that the false info felony as provided for in s.817.155, F.S.	ormation submitted in a