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Division of Corporations

Fax Number : (850)617-6381

Account Name : EXPRESS BUSINESS & TAX SERVICES INC

Account Number : I20220000138 : (786)239-9353 : (305)675-8465 Fax Number

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 FIDA JALAL OIL INC

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## From: Aimet Arenas

## **COVER LETTER**

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

SUBJECT:	FIDA JALAL OIL INC		
<del></del>	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an	original and one (1) copy of the arti	cles of incorporation and	I a check for:
□ \$70.00		☐ \$78.75	<b>⊠</b> \$87.50
Filing Fe		Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	
			& Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED
_		1.	
FROM:	FIDA JALAL OIL INC		
	Name	(Printed or typed)	
	5201 HARRISON	IST	
		Address	
	•	rudi 633	
	HOLLYWOOD, FL	33021 '	•
	City,	State & Zip	<del></del>
	305-206-0259		
	Daytime To	elephone number	
	MDBABAR22@YAHOO.	.сом	
-			
-	E-mail address: (to be used	l for future annual report n	iotification)

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 corporat	ion shall be:FIDA JALAL	OIL INC		
<u>ARTICLE II PRINC</u>	TIPAL OFFICE Principal street address		Mailing address, i	f different is:
, 2626 LEE ROAD			5201 HARRISON	ST
HWINTER PARK,	FL 32789		HOLLYWOOD, F	L 33021
ARTICLE III PURPO The purpose for which the	OSE he corporation is organized is:	ALL LAWFUL	PURPOSES	
ARTICLE IV SHARE	ES			
The number of shares of				
<u>ARTICLE V INITIA</u>	L OFFICERS AND/OR DIREC		• 1:	
Name and Title		Name	and Title:	
Address	5201 HARRISON ST	Addre	255:	
	HOLLYWOOD, FL 33021	1		
Name and Title:		Name	and Title:	
Address		Addre		
ill, has				
Name and Title:		Name	and Title:	24 OC 24 OC
Address		Addre	255:	
				<b>⇔</b> 38
				ATIONS

Name an	d Title:	Name and Title:	<del></del>	
Address		Address:	<u></u>	
( n	·			
on and the second	DECRETERED WENT			
	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable)	of the registered agent	is:	
Name:	MOHAMMED BABAR	,;		
Address:	5201 HARRISON ST	<b>,</b> .		
	HOLLYWOOD, FL 33021	<del>_</del>		
ARTICLE VII	<u>INCORPORATOR</u>			
The name and ad	dress of the Incorporator is:			
Name:	MOHAMMED BABAR			
Address:	5201 HARRISON ST	<del>_</del>		
en · · ·	HOLLYWOOD, FL 33021			
	·	<del>-</del>		
ARTICLE VIII	EFFECTIVE DATE:			
Effective date, if	other than the date of filing:ate is listed, the date must be specific and can	(OPT)	ONAL)	vs after the
filing.)			ye prior or yo ou,	
	inserted in this block does not meet the applicab		irements, this date wi	Il not be listed a
the document's ci	Tective date on the Department of State's record	S.		
	ed as registered agent to accept service of process			e designated in t
certificate, I am fo	umiliar with and accept the appointment as regist	tered agent and agree to	o act in this capacity	
	Mohammed Babar		10/1	1/2024
	Required Signature/Registered Agent			Date
I submit this docu	ument and affirm that the facts stated herein a			lon submitted in
	Department of State constitutes a third deares feld	ony as provided for in s	317.133. F-A	
document to the L	Pepartment of State constitutes a third degree felo Lohammed Babar	ony as provided for in s	.817.133, F.S. 10/11/2	004