

P24000064945

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

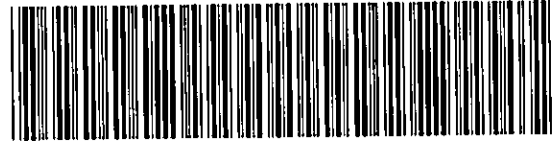
(Business Entity Name)

(Document Number)

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Office Use Only



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2024 OCT 18 AM 8:47

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RECEIVED  
2024 OCT 18 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE, FL



**FLORIDA CAPITAL COURIER SERVICES, INC**

2330 CLARE DR

TALLAHASSEE, FL 32309

(850) 491-9625 Brandon

(850) 524-5437 Teresa

(850) 524-6243 Rich

**Please use funds from account: I20210000160: \$70.00**

**Authorization Signature:** *James L. L...*

**Business Name:** Global Dairy Services Inc

**Document #**

☐ Certified Copy

☐ Certificate of Status

**NEW FILINGS**

**&**

**AMENDMENTS**

☐ Profit Corp

☐ Not for Profit

☐ Limited Liability

☐ Domestication

☐ LLLP

☒ **X** Corp

☐ Inc

☐ Other

☐ Amendment

☐ Resignation / Dissociation

☐ Change of Registered Agent

☐ Dissolution for LLC

☐ Merger

☐ Articles of Conversion

☐ Amended & Restated Articles of Incorporation

☐ Statement of Correction

**APOSTILLE(s)**

**&**

**OTHER FILINGS**

☐ Apostille(s)

☐ Country(s)

☐ Foreign Filing LLC

☐ Reinstatement

☐ Qualification

☐ Fictitious Name

☐ Annual Report

EXAMINER'S INITIALS: \_\_\_\_\_

2024 OCT 10 11:08:47



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TALLAHASSEE, FL 32309

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EXAMINER'S INITIALS:         

2024 OCT 18 10:06:47



## COVER LETTER

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

**SUBJECT:** Global Dairy Services 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:** Softbooks Inc

Name (Printed or typed)

5373 N Nob Hill Rd

Address

Sunrise, FL 33351

City, State & Zip

9548746230

Daytime Telephone number

info@softbooksinc.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: Global Dairy Services Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

15240 SW 54TH ST

MIRAMAR, FL 33027

**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: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Syed Habib - VP

Name and Title: Muhammad Zaman Madni - P

Address 15240 SW 54TH ST

Address: 15240 SW 54TH ST

MIRAMAR, FL 33027

MIRAMAR, FL 33027

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 AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: SOFTBOOKS INC

Address: 5373 N NOB HILL RD

SUNRISE, FL 33351

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Syed Habib

Address: 15240 SW 54TH ST

MIRAMAR, FL 33027


**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.)

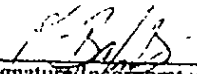
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

  
Required Signature/Registered Agent

10/18/2024  
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.*

  
Required Signature/Incorporator

Date 10/18/24