

(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
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2024 DEC 19 AH

2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-54372 (850) 524-6243 Authorization Signature Sutelli P140000 59708 HHJ Food Store Inc. Business #Document Walk in Will wait Certified Copies of the Articles of Incorporation Certificate of Status **NEW FILINGS** AMENDMENTS \_\_\_\_ Amendment Profit Not for Profit \_\_\_\_Resignation of R.A. Change of Registered Agent LLC \_ Domestication Dissolution/Withdrawal INC Conversion \_\_\_\_Statement of Authority CORP **OTHER** Merger . Amended and Restated Articles **OTHER FILINGS** REGISTRATION/QUALIFICATIONS Annual Report Foreign Filing Partnership Fictitious Name Reinstatement Statement of CORRECTION Statement of Authority Domestication of a Foreign Corp. \_\_\_\_ APOSTIL COUNTRY Other

FLORIDA CAPITAL COURIER SERVICES, INC

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

## Release and Permission to Use Name

(Date)	
To: Florida Department of State Division of Corporations	
Re: Release and permission to use name	
Entity's name: HHJ Food Store Inc	7877
Florida Doc. Number: P14000059708	ر د د
The date the document was filed with the Division of Corporations: 07/15/2014	: :
I give my permission to release the name: HHJ Food Store Inc.	<u>.</u>
to make it available to the Division of Corporations for use by others. I will not	<del></del>
revocate this release of name.	
Sincerely,	
Signed name:	
Hanna Dahi	
Title: President	
NOTARY)  Notary Public State of Florida Brett Iseac My Commission HH 174028 Exp. 9/9/2025	

## **COVER LETTER**

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

SUBJECT:	Hi-U Food Store		·
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	i a check for:
⊠ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		TOTAL CO	T REQUIRED
FROM:	Brett Isaac Name	c (Printed or typed)	
	2151 University blvd	S	
		Address	
	Jacksonville, Fi. 3221		
	City,	State & Zip	
	904-742-2388		
	Daytime T	elephone number	
	Brett@isnactaxcpa.co	Otti	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)

name of the corpor			
TICLE II PRIN 02 Edgewood A	Principal <u>street</u> address ve N	N	Mailing address, if different is:
cksonville, FL 32	2254		
TICLE III PURP purpose for which	OSE the corporation is organized is.	o Operate a convenier	ice store
			9999
<del></del>			· ĺ
	····		)
			:
	<u> </u>		
	stock is: 1000  AL OFFICERS AND/OR DIRECTOR	<u> </u>	12 i 2 <b>4</b>
number of shares of	stock is: 1000  AL OFFICERS AND/OR DIRECTOR		Jihad Zeidan VP
number of shares of	**Stock is: 1000  **AL OFFICERS AND/OR DIRECTOR** e: Hanna Dahi President		Jihad Zeidan VP 2202 Edgewood Ave N
number of shares of TICLE V INITI: Name and Titl	Stock is: 1000  AL OFFICERS AND/OR DIRECTOR e: Hanna Dahi President 2066 Samontee Rd Jacksonville, FL 32211	Name and Title:  Address:	
number of shares of TICLE V INITE: Name and Titl Address	Stock is: 1000  AL OFFICERS AND/OR DIRECTOR e: Hanna Dahi President 2066 Samontee Rd	Name and Title: Address:	2202 Edgewood Ave N Jacksonville, FL 32254
number of shares of TICLE V INITE: Name and Titl Address	Stock is: 1000  AL OFFICERS AND/OR DIRECTOR  e: Hanna Dahi President  2066 Samontee Rd  Jacksonville, FL 32211	Name and Title:  Address:  Name and Title:  Address:	2202 Edgewood Ave N Jacksonville, FL 32254
number of shares of TICLE V INITE  Name and Titl  Address  Name and Title	Stock is: 1000  AL OFFICERS AND/OR DIRECTOR  E: Hanna Dahi President  2066 Samontee Rd  Jacksonville, FL 32211	Name and Title:  Address:  Name and Title:  Address:	2202 Edgewood Ave N Jacksonville, FL 32254
Name and Title  Name and Title  Address	Stock is: 1000  AL OFFICERS AND/OR DIRECTOR e: Hanna Dahi President 2066 Samontoe Rd  Jacksonville, FL 32211	Name and Title:  Address:  Name and Title:  Address:	2202 Edgewood Ave N Jacksonville, FL 32254
Name and Title  Name and Title  Address	Stock is: 1000  AL OFFICERS AND/OR DIRECTOR  e: Hanna Dahi President  2066 Samontee Rd  Jacksonville, FL 32211	Name and Title:  Address:  Name and Title:  Address:  Name and Title:  Name and Title:	2202 Edgewood Ave N Jacksonville, FL 32254

Name an	: Title	Name and Title:	·
Address	<del></del> -	Address:	
		<del></del>	
The name and Fl	REGISTERED AGENT prida street address (P.O. Box NOT acce	eptable) of the registered agent is:	
Name:	Brett Isaac		710
Address:	2151 University Brvd S		1
	Jacksonville, FL 32216		ر  ر
IBTICLE (9)	TACOBBOD (TV)		· · · · · · · · · · · · · · · · · · ·
	NCORPORATOR		
The name and ad	dress of the Incorporator is:		· · · · · · · · · · · · · · · · · · ·
Name:	Brett Isaar		
Address:	2151-University Rlvd S	<del></del>	
	Jacksonville, Et. 32216		
(BTICLE IZI)	11111111111111111111111111111111111111		
Effective date, if i	EFFECTIVE DATE: other than the date of filing: Dec	amber 18, 2024 . (OPTIONAL	<b>-</b> )
(if an effective di filing.)	ite is listed, the date must be specific a	nd cannot be more than five days [	prior or 90 days after the
Note: If the date	inserted in this block does not meet the a	pplicable statutory filing requiremen	its this date will not be lieted.
the document's ef	fective date on the Department of State's	records.	ina, was date will not be fisted
Having been nam	ed of registered agent in accept service of	process for the above stated cornorat	ion at the place designated in t
certificate, I am fa	ntifiar with ford accept the appointment a	s registered agent and agree to act in	this capacity
	may X		12/18/24
	Required Signature/Registered A	<del>Q</del>	Date
I submit this doci document to the D	ment and affirestitual the facts stated he epitiment of style constitutes a third deg	rein are true. I am aware that the j	false information submitted it
	12/1/2	yong mo province for in 3.017.13	12/18/24
Required Signatur	c/Incorporator		)ate / / / /

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