

P25000015018

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

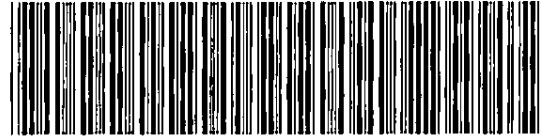
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600445974526

FILED

2025 MAR 14 AM 9:47

SECRETARY OF STATE  
TALLAHASSEE, FL


RECEIVED

2025 MAR 14 PM 4:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-54372  
(850) 524-6243

Please use funds from the account 120210000160: \$70.00

Authorization Signature 

Pleasant Liquors, Inc.

Business Name #Document

Walk in

\_\_\_ Will wait

\_\_\_ Certified Copy  
\_\_\_ Certificate of Status

**NEW FILINGS**

\_\_\_ Profit  
\_\_\_ Not for Profit  
\_\_\_ LLC  
\_\_\_ Domestication  
☒ INC  
\_\_\_ CORP  
\_\_\_ LP

**AMENDMENTS**

\_\_\_ Amendment  
\_\_\_ Resignation of R.A.  
\_\_\_ Change of Registered Agent  
\_\_\_ Revocation of Dissolution  
\_\_\_ Conversion  
\_\_\_ Statement of Authority  
\_\_\_ Merger

**REVOCATION OF DISSOLUTION**

**OTHER FILINGS**

\_\_\_ TRANSMITTAL LETTER  
\_\_\_ Fictitious Name  
\_\_\_ Statement of Authority  
\_\_\_ APOSTIL \_\_\_\_\_  
                    COUNTRY

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

**REGISTRATION/QUALIFICATIONS**

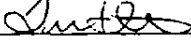
\_\_\_ Foreign Filing  
\_\_\_ Partnership  
\_\_\_ Reinstatement  
\_\_\_ Statement of CORRECTION  
\_\_\_ Domestication of a Foreign Corp.  
\_\_\_\_\_ Other

2025 MAR 14 AM 9:47  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-54372  
(850) 524-6243

Please use funds from the account 120210000160: \$70.00

Authorization Signature 

Pleasant Liquors INC.

Business Name #Document

Walk in \_\_\_\_\_ Will wait

\_\_\_\_ Certified Copy  
\_\_\_\_ Certificate of Status

**NEW FILINGS**

\_\_\_\_ Profit  
\_\_\_\_ Not for Profit  
\_\_\_\_ LLC  
\_\_\_\_ Domestication  
☒ INC  
\_\_\_\_ CORP  
\_\_\_\_ LP

**AMENDMENTS**

\_\_\_\_ Amendment  
\_\_\_\_ Resignation of R.A.  
\_\_\_\_ Change of Registered Agent  
\_\_\_\_ Revocation of Dissolution  
\_\_\_\_ Conversion  
\_\_\_\_ Statement of Authority  
\_\_\_\_ Merger  
**REVOCATION OF DISSOLUTION**

**OTHER FILINGS**

\_\_\_\_ TRANSMITTAL LETTER  
\_\_\_\_ Fictitious Name  
\_\_\_\_ Statement of Authority  
\_\_\_\_ APOSTIL \_\_\_\_\_  
                                    COUNTRY

**REGISTRATION/QUALIFICATIONS**

\_\_\_\_ Foreign Filing  
\_\_\_\_ Partnership  
\_\_\_\_ Reinstatement  
\_\_\_\_ Statement of CORRECTION  
\_\_\_\_ Domestication of a Foreign Corp.  
\_\_\_\_ Other

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

## COVER LETTER

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

**SUBJECT:** Pleasant Liquors 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 Filing Fee  
& Certified Copy

### ADDITIONAL COPY REQUIRE

Copy  
cate o  
E.  
REID

2025 MAR 14 AM 9:47

7  
 8  
 9  
 10  
 11

FROM: Brett isaac  
Name (Printed or typed)

2151 University blvd S  
Address

Jacksonville FL 32216

---

City, State & Zip

Daytime Telephone number \_\_\_\_\_

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: Pleasant Liquors Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address 2437 Pleasant Hill Rd Mailing address, if different is:  
Kissimmee, FL 34746

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To Operate a Liquor Store.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Milad Safar President</u>	Name and Title: <u>Fadel Makhlouf VP</u>
Address <u>2437 Pleasant Hill Rd</u>	Address: <u>2437 Pleasant Hill Rd</u>
<u>Kissimmee, FL 34746</u>	<u>Kissimmee, FL 34746</u>

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

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

FILED  
2025 MAR 14 AM 9:47  
CLERK OF STATE  
TALLAHASSEE, FL

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: Brett Isaac  
Address: 2151 Univeristy blvd S  
Jacksonville FL 32216

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Brett Isaac  
Address: 2151 University blvd S  
Jacksonville, FL 32216

**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  
Date 3/14/25

*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 3/14/25

RECEIVED  
DEPARTMENT OF STATE  
TALLAHASSEE, FL

2025 MAR 14 AM 9:47

FILED