# P97000038846

## TRANSMITTAL LETTER

300002148897-6 -04/21/97-07084-001 \*\*\*\*\*\*70.00 \*\*\*\*\*\*70.00

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

SUBJECT: _	Michael Malki IV, Inc	· .
	(Proposed cor	porate name)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$35.00

- 1	۰r	٠,	٠.		
		41	10	١л	٠

Name (printed or typed)

P.O. BOX 1853

Address

Oldsmar, Florida 34677

City, State, & Zip

(813)-545-2205

Telephone Number

-6-0-9

\* Character MAY 1 - 1997

Note: Please provide the original and one copy of the articles.

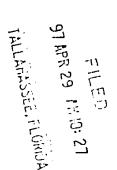


#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 23, 1997

MICHAEL MALKI P O BOX 1853 OLDSMAR, FL 34677

SUBJECT: MICHAEL MALKI IV, INC. Ref. Number: W97000009456



We have received your document for MICHAEL MALKI IV, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

if you have any questions concerning the filing of your document, please call (904) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 497A00020910

## ARTICLES OF INCORPORATION

OF

Michael Malki IV, Inc.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE!\_\_NAME

The name of the corporation shall be:

Michael Malki IV, Inc.

PR 29 AK IO HASSEE, FEC

ARTICLE IL PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

P.O. BOX 8030 Clearwater, Fl 34618

### ANTICLE III\_\_SHANES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 shares

ARTICLEIV.....INITIAL REGISTERED AGENT AND STREET LADDRESS.

The name and address of the initial registered agent is:

Michael Malki
1840 Gulf To B.Ay Bun
Clenkude Florida 34625

#### ARTICLE V INCORPORATORISI

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Michael Malki
P.O. Box 1853
Oldsmar, Florida 34677
141-66-0279
Lucine Malki
P.O. Box 1853
Oldsmar, Fl 34677
152-84-8181

Articles of Incorporation Filing Fee - \$35

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The nai	ne of the corporation is: Michael Malki IV, Inc.
	7: 97
2. The na	me and address of the registered agent and office is:  Michael Malki
	Michael Malki
	(Name) To 0
	1840 GULF TO BAY BUD'S
	(P.O. Box NOT accuptable)
٠.	C/EARWATEN Florida 34625
	(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registaged agent.

SIGNATURE

DATE

REGISTERED AGENT FILING FEE: \$35.00