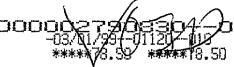
## Department of Sta

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



SUNShine Mobil Mort Trc.
(Proposed corporate name - must include suffix)

\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is 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 & Certified Copy Filing Fee,

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

1595 SeminoLE BLU
Address

LARGO F1 33770 City, State & Zip

(727) 585 – 4868 Daytime Telephone number



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

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.
ARTICLE I NAME The name of the corporation shall be:
SUNSHINE Mobil MART INC,
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:
10 Missouri Ave LARGO FI 33770
AILING Address: 1595 Seminole BLV, LARGO F1 33770 ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100 haves
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address of the initial registered agent are:
IBRAHIM SARAEB 601 Rosery Rd # 1401 LARGO F1 3377
LAKG-0 F/ 3377 <u>ARTICLE V INCORPORATOR</u>
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
IBRAHIM SARAEB
601 Rosery Rd #1401 LARGO FI 33770
285/4Hiry Scraet 02-26-1999
Signature/Incorporator Date

(An additional article must be added if an effective date is requested.)

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 registered agent

Signature/Registered Agent

02-26-99 Date