P99800046962

Requestor's Name



900002854839--5 -04/28/99--01057--015 ****140.00 ******70.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

☐ Mail out	☐ Will wait	Photocopy	Certificate of S	tatus 品 G
☐ Walk in	Pick up time		Certified Copy	·~~
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3	(Corporation Name)	(Docur	nent #)	99 MAY SECRE
2	(Corporation Name)	= (Docum	nent #)	
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NEW FILINGS
Profit
NonProfit
Limited Liability
Domestication
Other

AMENDMENTS
Amendment
Resignation of R.A., Officer/Director
Change of Registered Agent
Dissolution/Withdrawal
Merger

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

3,24

Examiner's Initials	



FLORIDA DEPARTMENT OF STATE Katherine Harris

Katherine Harris Secretary of State

May 3, 1999

DAVID L. SILVERMAN 1101 HILLCREST CT., #114 HOLLYWOOD, FL 33021

SUBJECT: SAAM, INC.

Ref. Number: W99000010290

We have received your document for SAAM, INC. and your check(s) totaling \$140.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of 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 (850) 487-6995.

Wanda Sampson Document Specialist

Letter Number: 499A00023685

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Dear Ma Sampson, as per our conversation enclosed are the articles of Incorporation for Jaam Concepts, Inc. Thank you

Fallahassee, Florida 32314

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF INCORPORATION

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 I NAME

The name of the corporation shall be:

Saam Concept, Inc.

ARTICLE II PRINCIPAL OFFICE

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

7290 Oak Meadows Cr. Orlando, Fl. 32835

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Marie Finkelstein Martinez 7290 Oak Meadows Cr. Orlando, Fl. 32835

ARTICLE V INCORPORATOR(S)

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

Marie Finkelstein Martinez 7290 Oak Meadows Cr. Orlando, Fl. 32835

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

22 day of *April*, 19<u>99</u>.

X Mise fin Belotein Martines
Signature

Notarization is not required.

ARTICLE VI DIRECTOR(S) OFFICER(S) SHAREHOLDER(S)

The name(s) and street address(es) of the director(s) are:

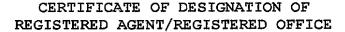
Marie Finkelstein Martinez 7290 Oak Meadows Cr. Orlando, Fl. 32835

The name(s) and street addresses of the officer(s) are:

Marie Finkelstein Martinez, President and Secy. 7290 Oak Meadows Cr. Orlando, Fl. 32835

The name(s) and street addresses of the shareholder(s) are:

To be determined at corporate meeting.



PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 name of the corporation is:

Saam Concept, Inc.

2. The name and address of the registered agent and office is:

Marie Finkelstein Martinez 7290 Oak Meadows Cr. Orlando, Fl. 32835

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.

X Marie Finkelstein Martinez 4/6

Notarization is not Required

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL. 32314