

P25000015705

(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



800444530438

03/18/25-01001-000770.00

SECRETARY OF STATE
TALLAHASSEE, FL

2025 MAR 18 AM 9:47

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2025 MAR 18 AM 11:24

RECEIVED

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 3/18 TRACI

CERTIFIED COPY _____

XX PHOTOCOPY _____

CUS _____

XX FILING INC _____

1. AKANABA CORP.
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: _____

FILED
2025 MAR 18 AM 9:47
TALAHASSEE, FL
CLERK OF STATE

COVER LETTER

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

SUBJECT: Akanaba Corp.

(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 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate Status
ADDITIONAL COPY REQUIRED	

STATE OF FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

2025 MAR 18 AM 9:47

FILED

FROM: Threlkeld Law, P.A.

Name (Printed or typed)

3003 Tamiami Trail N., Suite 400

Address

Naples, FL 34104

City, State & Zip

239-234-5034

Daytime Telephone number

the.georgios@gmail.com

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: Akanaba Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

26548 Hickory Blvd.

Bonita Springs, FL 34134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is: 2,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Georgios Papadopoulos, President Name and Title: _____

Address 26548 Hickory Blvd. Address: _____

Bonita Springs, FL 34134 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

2025 MAR 18 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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: Threlkeld Law, P.A.
 Address: 3003 Tamiami Trail N., Suite 400
Naples, FL 34104

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Tyler Johnson
 Address: 3003 Tamiami Trail N., Suite 400
Naples, FL 34104

2025 MAR 18 AM 9:47
 DEPARTMENT OF STATE
 TALLAHASSEE, FL
FILED

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 3/18/25

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 3/18/25