

P 2300000 4903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

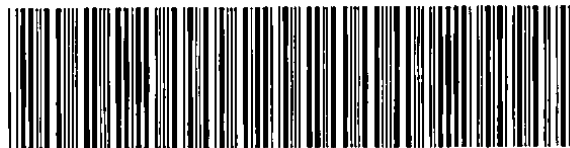
(Business Entity Name)

(Document Number)

ertified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: ROYAL CAPITAL ENTERPRISES, 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

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

ADDITIONAL COPY REQUIRED

FROM: ROYAL CAPITAL ENTERPRISES, INC
Name (Printed or typed)

7355 NW 83RD AVENUE

Address

TAMARAC, FL 33321

City, State & Zip

954-678-7588

Daytime Telephone number

YWILSON442@GMAIL.COM

E-mail address: (to be used for future annual report notification)

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

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FALL ARABIAN

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: ROYAL CAPITAL ENTERPRISES, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7355 NW 83RD AVENUE

SAME

TAMARAC, FL 33321

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: YASHICA A SNEED-WILSON, [P]

Address: 7355 NW 83RD AVENUE
TAMARAC, FL 33321

Name and Title: MARK WILSON, [VP]

Address: 7355 NW 83RD AVENUE
TAMARAC, FL 33321

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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28 JAN 23 AM 2:26
TAMARAC, FL 33321

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: MARK WILSON

Address: 7355 NW 83RD AVENUE

TAMARAC, FL 33321

ARTICLE VII INCORPORATOR

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

Name: YASHICA A SNEED-WILSON

Address: 7355 NW 83RD AVENUE

TAMARAC, FL 33321

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SECRETARY OF STATE

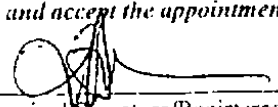
ARTICLE VIII EFFECTIVE DATE:

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

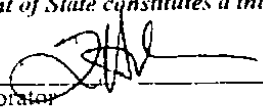


Required Signature/Registered Agent

1/23/2023

Date

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

1/23/2023

Date