Department of State Division of Corporation P. O. Box 6327 Tallahassee, Fl. 31314

SUBJECT:	UPTOWN CL	ate name - must include suf	C- Tix)	
**************************************	- (2) of the orticle			408 46014 ****78.75
Enclosed is an original 570.00 Filing Fee	and one(1) copy of the erticle \$78.75 Filing Fee & Certificate	S122:50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	.
FROM:	ANGL BAL	ADDITIONAL, CO	DPY REQUIRED	
ombala kalang da araba da arab		Address 33776 State & Zip	SE TALL	
	(813) 447 -	7745 Telephone number -3691	ORETAICY OF STATE LAHASSEE FLORIDA	

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



9

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

The name of the corporation shall be:

UPTOWN CUSTOMIS

ARTICLE II PRINCIPAL OFFICE

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

1393.5 missouri AUE.

33756 CLW

ARTICLE III SHARES

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

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are

ANEIL BALKISSOON 12387 84th WAY NO. LARGO TH 33771

ARTICLE VE INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are

ANELL BALKISSOON 12387 84th WAY N. LARCO FL 3377

Signature/incorporator

ANEIL BALKISSOON

(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