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Division of Corporations

Florida Department of State

Division of Corporations

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Division of Corporations
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: AMCHIRAGDING@AOL.COM

FLORIDA PROFIT/NON PROFIT CORPORATION**13713 HAWK LAKE DRIVE CORP**

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: 13713 HAWK LAKE DRIVE CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address13713 HAWK LAKE DRIVE
ORLANDO, FL 32837

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: ANY LEGAL OR LAWFUL PURPOSE**ARTICLE IV SHARES**The number of shares of stock is: 200 AT NO PAR VALUE**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: RAJIV HANOMAN - PRESIDENT/DIRECTORAddress 3361 SOUTH MONACO PKWY UNIT A
DENVER, CO 80222

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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STATE OF FLORIDA
CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF ORANGE

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: RAJIV HANOOMANAddress: 13713 HAWK LAKE DRIVEORLANDO, FL 32837**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: RAJIV HANOOMANAddress: 3361 SOUTH MONACO PKWY UNIT ADENVER, CO 80222**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 AgentMAY 6, 2022_____
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/IncorporatorMAY 6, 2022_____
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DEPT. OF STATE
FLORIDA

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