N08008805680

(Requestor's Name) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:					
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)				
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status					
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status					
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)				
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status					
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)				
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status					
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone #)				
(Business Entity Name) (Document Number) Certified Copies Certificates of Status					
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	PICK-UP WAIT MAIL				
(Document Number) Certified Copies Certificates of Status					
(Document Number) Certified Copies Certificates of Status					
Certified Copies Certificates of Status	(Business Entity Name)				
Certified Copies Certificates of Status	· · · · ·				
Certified Copies Certificates of Status					
	(Document Number)				
	Cartificat Coning Cartification of Status				
Special Instructions to Filing Officer:	Certificates of Status				
Special Instructions to Filing Officer:					
Special instructions to Filing Officer:	Consid tests stiers to Filips Offices				
	Special instructions to Filing Officer.				
	·				

Office Use Only



200131168582

06/13/08--01010--007 **78.75

SECRETARY OF STATE

6.13.0s

COVER LETTER

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

SUBJECT: ABHIRUCH	II TAMPABAY INC. (PROPOSED CORPORAT	E NAME – <u>MUST INCLU</u>	IDE SUFFIX)	
Enclosed is an original at \$70.00 Filing Fee	nd one(1) copy of the Articl 7 \$78.75 Filing Fee & Certificate of Status	es of Incorporation and a \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate	
FROM: NILIMA DESHPANDE Name (Printed or typed)				
	-			
TAMPA, FL 33647 City, State & Zip				
813-994-8643 Daytime Telephone number				

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

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

ABHIRUCHI TAMPABAY INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

9001 QUAILCREEK DRIVE, TAMPA, FL 33647

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of this non-profit incorporation is to bring together individuals from all over the world interested in "Marathi" language literature, one of the major language from India, for literature review, critic and analysis.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

The directors will be elected by majority vote of the Newbus

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Nilima Deshpande, 9001 Quailcreek Drive, Tampa, FL 33647, Director Manjusha Naik, 7317 Colonial Lake Drive, Riverview, FL, 33578, Assistant Director Neelima Alandikar, 9111 127th St, Seminole FL 33776, Treasurer Madhukar Virkud, 5701, 1st Ave N, St. Petersburg FL, Secretary

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is

Nilima Deshpande, 9001 Quailcreek Drive, Tampa, FL 33647

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Manjusha Naik, 7317 Colonial Lake Drive, Riverview, FL, 33578

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.

Signature/Registered Agent

_

Signature/Incorporator

6/04/08

Date