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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

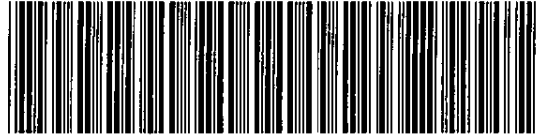
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL 32304

10 APR -5 PM 12:13

FILED

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## COVER LETTER

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

SUBJECT: RAKSHA FOUNDATION, INC  
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed is 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

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: MAHAVIR JAIN  
Name (Printed or typed)

9727 MOUNTAIN LAKE DR  
Address

ORLANDO, FL- 32827  
City, State & Zip

407-285-2820  
Daytime Telephone number

heema@maxintours.net  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

10 MAR 24 AM 11:29

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

March 5, 2010

MAHAVIR JAIN  
9727 MOUNTAIN LAKE DR  
ORLANDO, FL 32827

SUBJECT: RADSHA FOUNDATION INC  
Ref. Number: W10000011162

We have received your document for RADSHA FOUNDATION INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Christine Haney  
Senior Clerk  
New Filing Section

Letter Number: 110A00005444



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 25, 2010

~~ALL~~

MAHAVIR JAIN \*\*2ND REJECTION\*\*  
9727 MOUNTAIN LAKE DR  
ORLANDO, FL 32827

SUBJECT: RAKSHA FOUNDATION INC  
Ref. Number: W10000011162

We have received your document for RAKSHA FOUNDATION INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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If you have any questions concerning the filing of your document, please call (850) 245-6869.

Christine Haney  
Senior Clerk  
New Filing Section

Letter Number: 110A00005444

RECEIVED

10 APR - 5 PM 2:14

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
In Compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: RAKSHA FOUNDATION, INC

**ARTICLE II PRINCIPAL OFFICE**

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

9727 MOUNTAIN LAKE DR  
ORLANDO, FL-32832

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

SOCIAL SERVICE & WELFARE, DONATION TO CHILDREN SERVICES  
HELP POOR & NEEDY. DONATE IN RELIGIOUS SERVICES.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected or appointed:

~~FAMILY OPERATED~~  
Directors are elected as stated in the By-laws.

**ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS**

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

Mahavir Jain - Owner  
9727 Mountain lake Dr  
Orlando, FL-32832

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Mahavir Jain  
9727 Mountain lake Dr  
Orlando, FL-32832

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Mahavir Jain  
9727 Mountain lake Dr  
Orlando, FL-32832

\*\*\*\*\*

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 APR - 5 PM 12:13

FILED