

N/130000010452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

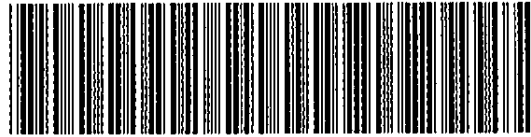
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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13 NOV 15 PM 4:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W13- 55993

11/19/13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 8, 2013

NARUPA TIWARI  
1007 COASTAL CIRCLE  
OCOEE, FL 34761

SUBJECT: SHREE MAHA KALI SHAKTI MANDIR AND CULTURAL CENTER,  
INC  
Ref. Number: W13000055993

We have received your document for SHREE MAHA KALI SHAKTI MANDIR AND CULTURAL CENTER, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

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.

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) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 713A00023649

Att Thomas Chang

REF # W13000055993

## COVER LETTER

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

**SUBJECT:** SHREE MAHA KALI SHAKTI MANDIR AND CULTURAL CENTER, 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: PADMINI BOODHOO**  
Name (Printed or typed)

**1800 TORRINGTON DR**  
Address

**MASCOTTE, FL 34753**  
City, State & Zip

**352 216 0457**  
Daytime Telephone number

**PBOODHOO79@YAHOO.COM**

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

RECEIVED  
13 NOV 15 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

REF # W13000065993  
AH Thomas Chang

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

**ARTICLE I NAME**

The name of the corporation shall be: SHREE MAHA KALI SHAKTI MANDIR AND CULTURAL CENTER, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
1007 COSTAL CIRCAL

OCOEE, FL 34761

Mailing address, if different is:  
1800 TORRINGTON DR

MASCOTTE, FL 34753

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: PLACE OF RELIGIOUS WORSHIP,  
OPERATING A DAY CARE CENTER FOR CHILDREN OF NEEDY WORKING PARENTS AN FAMILY,  
HELPING LOW INCOME INDIVIDUAL AND FAMILY WITH FINACIAL COUSELING AND BUDGET PLANS  
HELPING ,VOLUNTEER ASSISTS WITH MEALS ON WHEELS  
HELPING THE COMMUNITY IN ANY POSSIBLE WAY AND ALSO THE MEMBER OF THE MANDIR

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed: A MEETING WAS HELD  
BY THE MANDIR MEMBERSHIP AN MEMBER OF THE MANDIR WAS ELECTED AND APPOINTED BY VOTE.

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

Name and Title: SASENARINE OUDHNARINE - PRESIDENT

Address: 1800 TORRINGTON DR  
MASCOTTE, FL 34753

Name and Title: SHAMKUMAR DHANRAJ - VP

Address: 2857 CANYON TRAIL LN  
OCOEE, FL 34761

Name and Title: NARUPA TIWARI- SECRETARY

Address: 1007 COASTAL CIRCLE  
OCOEE, FL 34761

Name and Title: PADMIN BOODHOO - TREASURER

Address: 1800 TORRINGTON DR  
MASCOTTE, FL 34753

Name and Title: SANITA DHANRAJ - ASSISTANT TREASURE

Address: 2857 CANYON TRAIL LN  
OCOEE, FL 34761

Name and Title: KHRIS OMESH SINGH - PRIEST

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13 NOV 15 PM 4:22  
FILED  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

REF # W13000055993

Att Thomas Chang

Name and Title: DAVENDRA NARINE - PRIEST

Name and Title: \_\_\_\_\_

Address: 1007 COASTAL CIRCLE

Address: \_\_\_\_\_

OCOE, FL 34761

Name and Title: RAJENDRA DHANRAJ - ASSISTANT PRIEST

Name and Title: \_\_\_\_\_

Address: 2025 DUNSFORD DR

Address: \_\_\_\_\_

ORLANDO, FL 32808

**ARTICLE VI REGISTERED AGENT**

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

Name: PADMINI BOODHOO

Address: 1800 TORRINGTON DR

MASCOTTE, FL 34753

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Name: PADMINI BOODHOO

Address: 1800 TORRINGTON DR

MASCOTTE, FL 34753

*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 of Registered Agent

11/06/2013

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any 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 of Incorporator

11/06/2013

Date

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TALLAHASSEE, FLORIDA