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TRANSMITTAL LETTER

OO AUG 30 AM 10: 51

FALLAHASSEE, FLORIDA

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

SUBJECT:	FX AUTO UPHO	OLSTERY INC.	x)
	V		
Enclosed is an original a	and one(1) copy of the arrticle	s of incorporation and	a check for:
区 \$ 70.00 Filing Fee	\$ 78.75 Filing Fee & Certificate of Status	S 78.75 Filing Fee & Certified Copy	\$ 87.50 Filing Fee, Certified Cop
:		ADDITIONAL COR	& Certificate of Status Y REQUIRED
FROM VISHWANATH RAMDASS Name (Printed or typed)			
-	8133 ST. ANDREWS CIRCLE Address		
	ORLANDO, FL 32835		
•	City,Sta	te & Zip	
407-292-3630 Daytime Telephone number			

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

ARTICLES OF INCORPORATON

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles Of Incorporation.

ARTICLE 1 NAME

The name of the corporation shall be:

FX AUTO UPHOLSTERY INC.

PRINCIPAL OFFICE ARTICLE 11

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

5501 OLD WINTER GARDEN RD. **ORLANDO, FL. 32811**

ARTICLE 111 SHARES

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

10,000 SHARES

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

VISHWANATH RAMDASS 8133 ST. ANDREWS CIRCLE ORLANDO, FL 32835

INCORPORATOR

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

VISHWANATH RAMDASS 8133 ST. ANDREWS CIRCLE ANDO FL 32835

Signature/Incorporator

(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 designa 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

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