

PD00000095733

TRANSMITTAL LETTER

8000003420248--3
-10/10/00--01047--002
*****70.00 *****70.00

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

SUBJECT: Utamaro, Inc.
(Proposed corporate name - must include suffix)

FILED
00 OCT 10 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 of
Status
ADDITIONAL COPY REQUIRED

FROM: Nobuyoshi Tsukiyama
Name (Printed or typed)

8910 Olde Hickory Ave.
Address

Sarasota, FL 34238-3331
City, State & Zip

(941) 966-5047
Daytime Telephone number

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

No Copy
SEP
10/11

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Utamaro, Inc.

ARTICLE II PRINCIPAL OFFICE

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

474 John Ringling Blvd.
Sarasota, FL 34236

ARTICLE III SHARES

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

1.000 Shares \$1.00 Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Nobuyoshi Tsukiyama
8910 Olde Hickory Ave.
Sarasota, FL 34238-3331

ARTICLE V INCORPORATOR

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

Nobuyoshi Tsukiyama
8910 Olde Hickory Ave.
Sarasota, FL 34238-3331



Signature/Incorporator

10-06-00

Date

(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 designated 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

10-06-00

Date

FILED
00 OCT 10 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA