

Pod 000046034

TRANSMITTAL LETTER

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

100005327961--7
-04/23/02--01081--006
*****78.75 *****78.75

SUBJECT: MA LAXMI, INC.

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$ 78.75

Filing Fee &
Certificate

FILED
02 APR 23 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM:

CHANDRA M. RESAMWALA

Name (printed or typed)

3533 WARBLER DRIVE

Address

NEW PORT RICHEY, FL 34652

City, State & Zip

(727) 869-6062

Daytime Telephone Number

NOTE: PLEASE PROVIDE THE ORIGINAL AND ONE COPY OF THE ARTICLES.

84/16

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

MA LAXMI, INC.

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TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

3533 WARBLER DRIVE
NEW PORT RICHEY, FL 34652

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CHANDA M. RESHAMWALA
3533 WARBLER DRIVE
NEW PORT RICHEY, FL 34652

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

CHANDA M. RESHAMWALA
3533 WARBLER DRIVE
NEW PORT RICHEY, FL 34652

ARTICLE VI INITIAL OFFICER(S) AND DIRECTOR(S)

CHANDA M. RESHAMWALA DIRECTOR, PRESIDENT
3533 WARBLER DRIVE
NEW PORT RICHEY, FL 34652

MAHENDRA I. RESHAMWALA, DIRECTOR, V.P., TREASURER, SECRETARY
3533 WARBLER DRIVE
NEW PORT RICHEY, FL 34652

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

22ND day of MARCH, 2002.

Chanda M. Reshamwala
SIGNATURE

Mahendra I. Reshamwala
SIGNATURE

FILED
02 APR 23 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501,
FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER
THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT
IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

1. The name of the corporation is: MA LAXMI, INC.
2. The name and address of the registered agent and office is:

CHANDA M. RESHAMWALA
(Name)

3533 WARBLER DRIVE
(P.O. Box not acceptable)

NEW PORT RICHEY, FL 34652
(City/State/Zip)

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.

Chanda M. Reshamwala
Signature

3-22-02
Date