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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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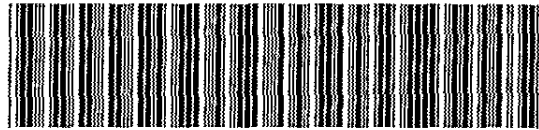
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: SHIV SHAMTHI SHIV SHAMBHU INC.  
SHIV SHAMTHI INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: MAHENDRA VYAS  
Name (Printed or typed)

2406 S. US HIGHWAY 17  
Address

CRESCENT CITY FL. 32112  
City, State & Zip

386 698 1170 OR 386 698 2299  
Daytime Telephone number

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

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be:

SHIV SHAMBHU Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2406 S. US. HIGHWAY 17  
CRESCENT CITY FL 32112

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFIT MOTEL

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

(1) MINA M. VYAS : 2406 S. US HW 17  
PRESIDENT. CRESCENT CITY FL 32112

(2) MAHENDRA VYAS : 2406 S. US. H.W. 17  
DIRECTOR CRESCENT CITY FL 32112

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

MAHENDRA VYAS.  
2406 S. US HW 17  
Crescent City FL 32112

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MAHENDRA VYAS  
2406 S. US. HW. 17  
CRESCENT CITY. FL 32112.

\*\*\*\*\*  
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

Date

3-3-03

Signature/Incorporator

Date

3-3-03

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA