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| (Requestor's Name) | | | | | |
|---|----------------|-----------|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP | WAIT | MAIL | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
| | | | | | |
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Office Use Only



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SECREBASE FLORIDA

TRANSMITTAL LETTER

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

| SUBJECT: | 4 | INVESTME | |
|-------------------------|--|--|---|
| | (PROPOSED CORPORATE | NAME – MUSŤ ÌNCLUDI | E SUFFIX) |
| | | | |
| Enclosed is an origin | nal and one(1) copy of the articl | les of incorporation and a | check for: |
| ☐ \$70.00 Filing Fee | □ \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED |
| | RAVINDER | FROM: PALLERLA Printed or typed) | |
| | | Box 4254 Address | |
| | TALLA HASS City, | EE, FL 3231! State & Zip | 5-4254 |
| | | 205-8278 Telephone number | |

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

| F | 2 | İ | - | n |
|---|----|---------|---|----|
| - | ٠. | A 17.54 | 2 | 1. |

| ARTICLES OF INCORPORATION | (Profit) 03 MAR 21 AM II: I |
|---|---|
| In compliance with Chapter 607 and/or Chapter 621, F.S | SECULIANT OF STAT |
| ARTICLE I NAME | SECRLI ALL OF STAT TALLAHASSEE, FLORID |
| The name of the corporation shall be: PEDI | CLE INVESTMENTS, INC |
| • | |
| ARTICLE II PRINCIPAL OFFICE | |
| The principal place of business/mailing address is: | P. D. Box 4254, |
| | TALLAHASSEE, FL 32315-4 |
| | , |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: | en e |
| The purpose for which the corporation is organized is. | INVESTMENT BUSINESS |
| | |
| ARTICLE IV SHARES | equery , |
| The number of shares of stock is: 1000 | Shares. |
| | |
| ARTICLE V INITIAL OFFICERS/DIRECTOR | S (optional) |
| | EENCHANDRA MALLIPEDDI |
| ANT | L DAVIDI |
| RAV | INDER PALLERLA |
| NAV | EEN KASIREDDY |
| ARTICLE VI REGISTERED AGENT | |
| The <u>name and Florida street address</u> of the registered a | LHATIANCIA II |
| | 2415, OLD. ST. AUGUSTINE RD. |
| | 100 HIO 34 |
| ARTICLE VII INCORPORATOR | TALLAHASSEE, FL 32301 |
| The <u>name and address</u> of the Incorporator is: | |
| NAVEEN MALLIPEDDI 1951, N. MERIDIAN RD., #82 | |
| 171) IN WENTDIAN NO. TO OF | |

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this

3/21/03. Date

certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Incorporator