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(Re	questor's Name)	
(Ad	dre <b>ss</b> )	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e#)
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(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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# TRANSMITTAL LETTER

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

SUBJECT:	SHOLA	INC	
	(PROPOSED CORPORATE		E SUFFIX)
Enclosed is an origin	nal and one(1) copy of the artic	les of incorporation and a	check for:
☐ \$70.00 Filing Fee	• • • • • • • • • • • • • • • • • • • •	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status
		FROM:  KEBEDE  Printed or typed)  MCOYA RD  Address	<u>-</u>
	HAVANA City,	FL 32333 State & Zip	· <u>·</u>
•	850 - 53 Daytime T	9-6620 elephone 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)

SHORE TARY OF SIME DIVISION OF CHAPMANIONS

ARTICLE I NAME

The name of the corporation shall be:

SHOLA ING

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## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4354 CONCOYD RD HAYANA FL 32333

ARTICLE III **PURPOSE** 

The purpose for which the corporation is organized is:

Reatail Sales

### ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

AFEWORK KEBEDE/President 4354 CONCOYOURD HAVANA FL 32333

ARTICLE VI REGISTERED AGENT

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

AFEWORK KEBEDE 4354 Concord RD HAVANA FL 32333
ARTICLE VII \_ INCORPORATOR

The name and address of the Incorporator is:

AFEWORK KEBEDE 4354 CONTOYE RD HAVANA FL 32333

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

08/05/03 Date - 08/05/03

Signature/Incorporator