

PO30000097970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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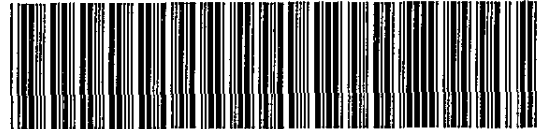
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE FLORIDA

9/8/03

TRANSMITTAL LETTER

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

8/29/2003

SUBJECT: VID GANESH EMPIRE INTERNATIONAL
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)
REAL ESTATE DEVELOPMENT INC.

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:

VIDYARTIE GANESH
Name (Printed or typed)

8137 Chesebro Ave
Address

North Port Florida 34287
City, State & Zip

941-429-4720
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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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:

VID GANESH EMPIRE INTERNATIONAL REAL ESTATE
DEVELOPMENT INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8137 CHESEBRO AVE P.O. Box 7791
NORTH PORT, FL 34287 NORTH PORT, FLORIDA
34287.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE

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):

VIDYARTIE GANESH , PRESIDENT, SECRETARY, DIREC
8137 CHESEBRO AVE.
NORTH PORT, FL. 34287

ARTICLE VI REGISTERED AGENT

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

VIDYARTIE GANESH
8137 CHESEBRO AVE.
NORTH PORT, FL. 34287

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VIDYARTIE GANESH
8137 CHESEBRO AVE.
NORTH PORT, FL. 34287

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

Signature/Incorporator

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Date

Date