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Florida Department of State

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Division of Corporations

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From:

Account Name : A.A.ALI, CPA
Account Number : I20000000192
Phone : (407)298-3900
Fax Number : (407)298-0660

FLORIDA PROFIT CORPORATION OR P.A.

LEKHRAJ INVESTMENTS, INC.

Certificate of Status	1
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SLONETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION Of

LEKHRAJ INVESTMENTS, INC.

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

LEKHRAJ INVESTMENTS, INC. 13821 HAWKEYE DRIVE ORLANDO, FL 32837

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 1000 shares of (One) Dollar(s) (\$1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agents of this Corporation is:

Name:	NARINE LEKHRAJ
Address:	13821 HAWKEYE DRIVE
City:	ORLANDO, FL 32837

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ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have (ONE) director initially. The number of directors may be either increased or diminished from time to time by the By-laws, but shall never be less than one (1). The name and address of the initial director(s) of the corporation are as follows:

Name:	NARINE LEKHRAJ, PRESIDENT
Address:	13821 HAWKEYE DRIVE
city:	ORLANDO, FL 32837

ARTICLE VII - INCORPORATORS

The name and address of the person(s) signing these articles of Incorporation are as follows:

Name:	NARINE LEKHRAJ
Address:	13821 HAWKEYE DRIVE
City:	ORLANDO, FL 32837

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CECKLIARY OF STATE

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

NARINE LEKHRAJ/Registered Agent

Date

NARINE LEKHRAJ/ Theorporator

Date