

P04000007746

(Requestor's Name)

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(City/State/Zip/Phone #)

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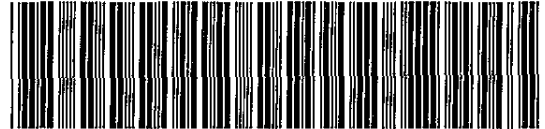
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

✓

2-1-12

TRANSMITTAL LETTER

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

SUBJECT: SAGAR DHAIZA INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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:

CHANDRAKANT M. PATEL.
Name (Printed or typed)

719 W. WASHINGTON ST.
Address

QUINCY FL 32351.
City, State & Zip

847-477-1456.
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:

SAGAR. DHARA .INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

719. W. WASHINGTON. ST.

QUINCY. FL. 32351.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LIQUORS. STORE.

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):

CHHITU BHAI B. PATEL President.

NARENDRA A. PATEL. Vice. President.

CHANDRA KANT M. PATEL. SEC

ARTICLE VI REGISTERED AGENT

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

CHANDRAKANT. M. PATEL

719. W. WASHINGTON ST.

QUINCY. FL. 32351.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CHANDRAKANT. M. PATEL.

719. W. WASHINGTON. ST.

QUINCY. FL. 32351

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

01-12-04

Signature/Incorporator

Date

01-12-04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN 12 PM 1:31

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