705600070724

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

Office Use Only



400054300834

05/13/05--01036--016 **87.50

SECILL TARY OF STATE IVISION OF CERT RATIO

1. Stylete 144 13 5005

TRANSMITTAL LETTER

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

194

SUBJECT:	(PROPOSED CORPORA	LNC. TE NAME - MUST INCL	UDE SUFFIX)	_			
Enclosed are an orig \$70.00 Filing Fee	inal and one (1) copy of the article \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status				
FROM:	5111, ARBOR J	TATENENI (Printed or typed) OINTE CIRCLE Address -33617 State & Zip		05 MAY 12 PH 2: 1,0	SECRETARY OF STATE VISION OF CORPORATION		
813 - 868 - 005) · Davime Telephone number							

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE 1 NAME The name of the corporation shall be:	
UNIFLEX INC.,	
ARTICLE II PRINCIPAL OFFICE	•
The principal place of business/mailing address is:	
5111, ARBOR POINTE CIRCLE, APT#204,	
TAMPA , FL-33617	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
• •	
ANY AND ALL LAWFUL BUSINESS	
ARTICLE IV SHARES	<u>سب</u> سب
The number of shares of stock is:	05 718
100	SECRETAR VISION OF C
APPEAL OF THE THEORY AND	= = = = = = = = = = = = = = = = = = =
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
List name(s), address(es) and specific inte(s).	
	siale variio 2: 49
	,
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the registered age	ent is:
SRI KRISHNA TATENENI,	
SIII ARBOR POINTE CIRCLE, APT# 204	7 117 1 1 2 2 2
TAMPA, FL-33617	ARTICLE VII The effective d
ARTICLE VII INCORPORATOR	for this corpora
The <u>name and address</u> of the Incorporator is:	01 11 1
SRI KRISHNA TATENENI,	Shall be:
SILI ARBOR POINTE CIRCLE, APT # 204	05/11/2005
TAMPA, FL-33617	- 1, 1, 1
**********************	********
Having been named as registered agent to accept service of process for the above stated corporation to certificate, I am familiar with and accept the appointment as registered agent and agree to act in this ca	
	-11-
SRICRISHNA TATENENT 05 Signature/Registered Agent	11/2005
Signature/Registered Agent	Date

J.N. SPIKNISHNA TATENENT Signature/Incorporator 05/11/2005 Date