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(Requestor's Name)

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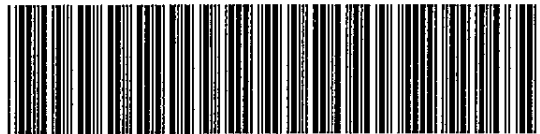
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
ATTN: HASSELL, CLARE

J. Shivers Aug 22 2005

TRANSMITTAL LETTER

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

SUBJECT: _____ Donax USA Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: _____ Charles Gokool
Name (Printed or typed)

_____ 9485 SW Cutler Ridge Drive
Address

_____ Miami Fl. 33157
City, State & Zip

_____ 786-624-8073
Daytime Telephone number

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

DONAX USA INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11420 SW 193 Street, Miami Fl. 33157

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Charles K. Gokool	9485 Sw Cutler Ridge Dr. Miami Fl. 33157	Director
Lamar J. Gokool	9485 SW Cutler ridge Dr. Miami Fl. 33157	Secretary
Mahadeo M. Gokool	11420 SW 193 Street Miami Fl. 33157	Director

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Mahadeo M. Gokool 11420 SW 193 Street Miami 33157

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Donax USA Inc.
11420 SW 193 Street
Miami Fl. 33157

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

Mahadeo M. Gokool
Signature/Registered Agent

8-18-05
Date

Charles K. Gokool CHARLES K. Gokool
Signature/Incorporator

08-16-05
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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