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

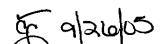
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05 SEP 26 PH 12: 32 RECEIVED



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2005 SEP 26 PM 12: 41

TALLAHASSEE FLORIDA

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

	NASRIN.				
SUBJECT:	AFFE	ZNC.			
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Paul and an an and	*	. 641 - 41		1 1 6	
Enclosed are an orig	ginal and one (1) copy	y of the artic	cles of incorporation and	a check for:	
\$70.00	\$78.75		□ \$78.75	□ \$87.50	
	Filing Fee		Filing Fee	Filing Fee,	
	& Certificate of S	tatus	& Certified Copy		
				& Certificate of	
			ADDITIONAL CO	Status ADV DECLUDED	
		(ADDITIONAL CO	TI KEQUIKED	
		_			
FROM:	MAMUNUR	KAK	MAN!		
		Name (Printed or typed)		
	6000 11	40	11		
-	5800 W.	<u> </u>	ddress		
	TRENTON	V. P	L, 32693		
TRENTON, FL, 32693 City, State & Zip					

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)	The state of 1
ARTICLE I NAME	2005 000 26 04 12 1
The name of the corporation shall be:	2005 SEP 26 PM 12: 41
NASRIN INC,	ATT OF STATE
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
5800 W. SR. 26 TRENTON, FL, 32693	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
GAS X GORIC,	
ARTICLE IV SHARES	
The number of shares of stock is:	
/	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	
MAMUNUR RAHMAN	
1200 KUSHMER 57	
BELL FL, 32619	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the	ne registered agent is:
MAHUNUR RAHMAN	
1200 KUSHMER 57	
BELL, FL, 32619	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is: MANUNUR RAHMAN	
1200 KUSH MER 57	
BELL FL, 32619	*******
Having been named as registered agent to accept service of process for the above sta certificate, I am familiar with and accept the appointment as registered agent and agi	
and the same of th	9-26-05 Date 9-26-05
Signature/Registered Agent	Date
	9-26-05

Signature/Incorporator

Date