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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE

SWOV IL PM 3: 2



COVER LETTER

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

SUBJECT: OM	(AR HOTELS INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INC</u> L	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:
S70.00 Filing Fee	▼\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
EDOM: N	ARENDRA PATEL		
PROM.	Name	(Printed or typed)	
-	6545 RAMONA BLVD	Address	
-	JACKSONVILLE, FL 3	2205 State & Zip	
5	904 781 1940		

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

Daytime Telephone number

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

OMKAR HOTELS INC

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ECHETAINY OF STATE

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is:

6545 RAMONA BLVD, JACKSONVILLE FL 32205

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NEW BUSINESS

ARTICLE IV

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

NARENDRA PATEL 6545 RAMONA BLVD, JACKSONVILLE FL 32205 DIRECTOR, PRESIDENT, SECRETARY, TREASURER

CHETAN PATEL 5324 VIVERA LANE, JACKSONVILLE FL 32244 VICE PRESIDENT

REGISTERED AGENT ARTICLE VI

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

NARENDRA PATEL 6545 RAMONA BLVD, JACKSONVILLE FL 32205

<u>ARTICLE VII</u> INCORPORATOR

The **name and address** of the Incorporator is:

NARENDRA PATEL, 6545 RAMONA BLVD, JACKSONVILLE, FL 32205 ARTICLE VIII EFFECTIVE DATE

EFFECTIVE DATE OF THE CORPORATION

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

Signature/Incorporator