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05 NOV 15 AM 9:30

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TRANSMITTAL LETTER

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

SUBJECT: SOAKA 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: OLUSOLA ADABIRI
Name (Printed or typed)

3250 NW 214TH
Address

Miami FL 33056
City, State & Zip

786 317 8167
Daytime Telephone number

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

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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:

SOAKA Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3250 NW 214 ST
Miami, FL 33056

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

IMPORT/EXPORT
(CLOTHING, SHOES, BAGS, JEWELRY, WATCHES, etc)
AND ACCESSORIES etc

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CLUSOLA ADABIRI (OWNER)
3250 NW 214 ST
Miami FL 33056

ARTICLE VI REGISTERED AGENT

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

CLUSOLA ADABIRI
3250 NW 214 ST
Miami, FL 33056

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CLUSOLA ADABIRI
3250 NW 214 ST
Miami FL 33056

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

11/10/05
Date


Signature/Incorporator

11/10/05
Date