

PO600000104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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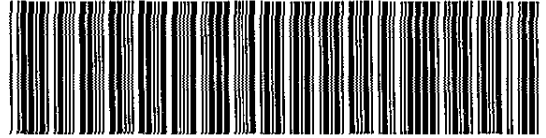
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

44

## COVER LETTER

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

SUBJECT: KRISHNA DEVELOPMENT 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: KRISHNA DEVELOPMENT INC.  
Name (Printed or typed)

39 JACK DR  
Address

QUINCY, FL 32352  
City, State & Zip

850-627-4750  
Daytime Telephone number

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:

KRISHNA DEVELOPMENT INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

39 JACK DR.  
QUINCY, FL 32352

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Real Estate, Hotel, Land Development.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

PATEL PARESHKUMAR C (President)  
39 JACK DR. QUINCY, FL 32352  
GOCOL PARESH M (Sec.)  
5238 Woodgate way, Marianna, FL 32446

**ARTICLE VI REGISTERED AGENT**

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

PATEL PARESHKUMAR C  
39 JACK DR  
QUINCY, FL 32352

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

1/4 PATEL PARESHKUMAR C  
39 JACK DR.  
QUINCY, FL 32352

\*\*\*\*\*  
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

Date

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA