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07 JAN 16 AM 8: 32 SLOKETARY OF STATE ALLAHASSEF FLORIN

BINERIE JAN 18 5001

01/05/06

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

Re: Docani, Inc.

Gentlemen,

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$78.75

This represents the Filing Fees, Certified Copy of Articles of Incorporation and Fee for the Registered Agent Designation for the above named corporation.

Very truly yours

(Lazara Augustin)

Docani Inc 8385 SW 48th St Suite 705 Miami, FL 33155-5414 Tel (305) 220 6036

ART	TICLES OF INCORPORATION	
CON AIG 1A	1 CORPORATED	-
OUGANI II		FILED
The undersigned acting as the incorporate the following articles of incorporation for such	(name of corporation) ors of a corporation under the Florida Busing corporation:	07 JAN 16 AM 8: 32 ess Corporation Act, adopt(s) SECRETARY OF STATE FALLAHASSEE, FLORIDA
	ARTICLE I - CORPORATE NAME	
The name of the corporation is:	NI INCORPORAT	<u>E3</u>
	ARTICLE II - DURATION	
This corporation shall exist perpetually u	nless dissolved according to Florida law.	
The corporation is organized for the purp United States and the State of Florida.	ARTICLE III - PURPOSE sose of engaging in any activities or business	s permitted under the laws of the
-	ARTICLE IV - CAPITAL STOCK OD shares of common stock, par value	e \$ <u>1 - 000</u> per share.
	ICLE V - INITIAL PRINCIPAL OFFICE office and, if different, the mailing address	is:
STREET ADDRESS 8385 Sc	N 48 M ST	
Suite 70%	5	
CITY MIBMI	FLORIDA	ZIP 3315 T
Mailing address, if different		
STREET ADDRESS		
CITY	FLORIDA	ZIP
ARTICLE VI -	INITIAL REGISTERED OFFICE AND A	AGENT
The street address of the initial regist	ered office and the name of the initial re	gistered agent at the office is:
NAME LAZARA AUGUST	N	
ADDRESS 8385 SW 4814		
CITY WIRWI	FLORIDA	ZIP33 (T

	BOARD OF DIRECTORS	
This corporation shall have +wo (2		
either increased or diminished from time to time by the By-Lav		ne (1). The names and
addresses of the initial director(s) of the corporation are as follows:	ows.	<u></u>
NAME Lazara Augustin		
ADDRESS 8385 SW 48 M ST		
CITY MIAMI	STATE FZ	ZIP 3372
NAME Raymond Augustin		
ADDRESS 8385 8W 484 ST.		
CITY MIAMI	STATE FL	ZIP 33/5
NAME		
ADDRESS		
CITY	STATE	ZIP
ARTICLE VIII -	INCORPORATORS	
The names and addresses of the incorporators signing these Ar		ows:
0 = 1 = 11 000		
	STATE C	2m B216
CITY MIAM!	STATE FC	ZIP 33155
NAME RATMOND AUGUSTIN		
ADDRESS 8385 SW 48 M ST		
CITY WIAMI	STATE FZ	ZIP ZZIJ
NAME		
ADDRESS		
CITY	STATE	ZIP
The undersigned incorporator(s) have executed these Art	icles of Incorporation this	20 K
day of DECEMBER	J8 200 6	
-	Lana Chansta	(Signature)
	The contraction of the contracti	(Signature)
	Layning the	(Signature)
	1 1/2	
	UNIT	(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

DOCANI

FILED 07 JAN 16 AM 8: 32 SLORETARY OF STATE TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.