

PD8000087546

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(Requestor's Name)

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(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

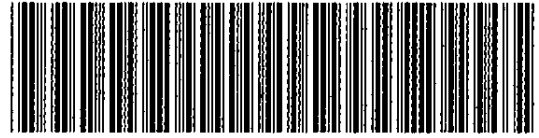
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRD  
9/24

268-42786

## COVER LETTER

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

**SUBJECT:** AURICA USA CORPORATION

(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:** CHETANDAS G. GOPANI

Name (Printed or typed)

305 LONESOME PINE DRIVE

Address

LONGWOOD, FL 32779

City, State & Zip

407-619-8498

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 15, 2008

CHETANDAS G GOPANI  
305 LONESOME PINE DRIVE  
LONGWOOD, FL 32779

SUBJECT: AURICA CORPORATION  
Ref. Number: W08000042786

We have received your document for AURICA CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap  
Regulatory Specialist II  
New Filing Section

Letter Number: 108A00050189

Division of Corporations - P.O. BOX 6327, Tallahassee, Florida 32314

**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:

**AURICA USA CORPORATION**

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

305 LONESOME PINE DRIVE  
LONGWOOD, FL 32779

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The Corporation will engage in any lawful business or activity for which corporations may be organized under Florida Business Corporation Act

**ARTICLE IV SHARES**

The number of shares of stock is:

The total number of shares of capital stock which the corporation has the authority to issue is 20,000 shares of common stock at \$0.01 par value per share.

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

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

Title: VP Mr. Ruben E. Agosto, 99 Spring Glen Drive, Debary, FL 32713

Title: P Mr. Chetandas G. Gopani, 305 Lonesome Pine Drive, Longwood, FL 32779

**ARTICLE VI REGISTERED AGENT**

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

Chetandas G. Gopani  
305 Lonesome Pine Drive  
Longwood, FL 32779

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Chetandas G. Gopani  
305 Lonesome Pine Drive  
Longwood, FL 32779

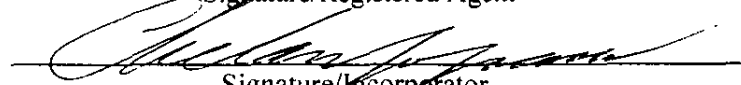
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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

9/18/2008

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

9/18/2008

\_\_\_\_\_  
Date

FILED

08 SEP 24 PM 12: 01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA