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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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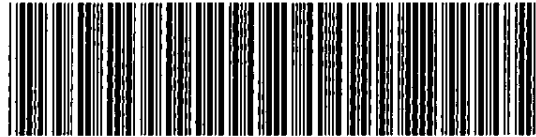
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: The Dark Room Design incorp.
(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: Ali Kasmani
Name (Printed or typed)

3161 W. Oakland Park Blvd. #920
Address

Fort Lauderdale FL 33311
City, State & Zip

305-788-8291
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:

The Dark Room Design incorp.

ARTICLE II PRINCIPAL OFFICE

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

3161 West Oakland Park Blvd. #1260
Fort Lauderdale Fl. 33311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Taking Professional Pic., Print Posters, T-shirt, Flyers ..

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):

Bryan Ciceron

President

2701 N.W. 36 Ave.

Lauderdale Lakes, Fl. 33311

Ali Kasmali
Vice President
12666 S.W. 94 Ct.
Miami, Fl. 33176

ARTICLE VI REGISTERED AGENT

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

Ali Kasmali

12666 S.W. 94 Ct.

Miami, Fl. 33176

ARTICLE VII INCORPORATOR

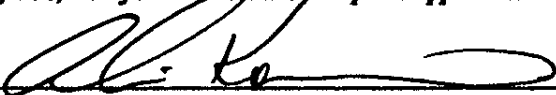
The name and address of the Incorporator is:

Ali Kasmali

12666 S.W. 94 Ct.

Miami, Fl. 33176

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

2/27/09
Date

2/27/09
Date