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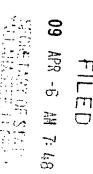
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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COVER LETTER

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

SUBJECT: UNITED	IMPORT AND EXPORT WHOLE (PROPOSED CORPORA)	SALE INC	Type cheery)	
	(FROFOSED CORFORA	TE NAME - MOST INCL	<u>JUDE SUFFIX</u>	
Enclosed are an orig	inal and one (1) copy of the artic	les of incorporation and	a chack for	
Enclosed are an orig	mai and one (1) copy of the artic	nes of incorporation and	a check for.	
\$70.00	\$78.75	□ \$78.75	☑ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
		ADDITIONAL CO	Status NOV DECLUDED	
		ADDITIONAL CO	T I KEQUIKED	
EDOM. ANDAMA ALMECO				
FROM: AKRAM A ALKESS Name (Printed or typed)				
2346 WINKLER AVE # G203				
Address				
FORT MYERS FL 33901				
City, State & Zip				
(239)281-7065				
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:

UNITED IMPORT AND EXPORT WHOLESALE INC

ARTICLE II PRINCIPAL OFFICE

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

2032 BEACON MANOR DR. FORT MYERS FL 33907

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES @ \$1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): AKRAM A ALKESS 2346 WINKLER AVE G203 FORT MYERS FL 33901

ARTICLE VI REGISTERED AGENT

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

SAFE A YOUSIF 15519 SPRING LINE LN FORT MYERS FL 33905

FORT MYERS FL 33905

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: SAFE A YOUSIF
15519 SPRING LINE LN

certificate, I am familiar with and accept the appointment as registered agent of	and agree to act in this capacity
5 a Cadi	04/01/2009
Signature/Registered Agent	Date
saladi	04/01/2009
Signature/Incorporator	Date

09 APR -6 AM