P10000025710

(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:				

Office Use Only



800171212218

03/04/10--01014--003 **87.50

TILED
MAR 23 MI II: 44

ACCESTAGY OF STATE
MARKSTER BY ARREST

W1000011318

H

3-24-10 NA

COVER LETTER

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

SUBJECT:	BJECT: CLUCK KG, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l 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 CO	OF I REQUIRED	
FROM:	Claudia Nam	Zamarri 001 e (Printed or typed)		
_	11262 N.W	53 Lane Address		
	Doral, FL City	33178 , State & Zip		
	(305) 898 - 9 Daytime 1	D79 Telephone number		
	Clauzama 6	Vahob CoM	notification)	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 5, 2010

CLAUDIA ZAMARRIPA 11262 N.W. 53 LANE DORAL, FL 33178

SUBJECT: AURIKKA, INC. Ref. Number: W10000011318

We have received your document for AURIKKA, INC. and your check(s) totaling \$87.50. 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) 245-6869.

Christine Haney Senior Clerk New Filing Section

Letter Number: 910A00005500

un j	
TICLES OF INCORPORATION on compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME The name of the corporation shall be:	
•	圣 州 (5)
aurikka. Igroup. Inc.	
ARTICLE II PRINCIPAL OFFICE	FILE MR 23 MR 23 MR 23 MR 23
The principal street address and mailing address, if different is:	
11262 NW 53 Lane Doral FL 33178 ARTICLE III PURPOSE	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
To provide Holistic Care.	
ARTICLE IV SHARES The number of shares of stock is:	
che 001	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	
Claudia Zamarripa, President 11262 NW 53 Lane	
Doral, FL 33178	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the registered	d agent is:
Claudia Zamarripa	
11262 NW 53 Lane	
Doral, FL 33178	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Claudia Zamarripa 11262 NW 53 Lane	
Doral, FL 33178	
1>0\7\limit(, +\cup 2\)! 10	*******
Having been named as registered agent to accept service of process for the about place designated in this certificate, I am familiar with and accept the appointment	-
agree to act in this capacity	1
1.2 LULV	2/27/2010
Signature/Registered Agent	1 Date 12/17/2010