

P11000044167

(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



600205773796

05/06/11--01043--012 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAY - 6 PM 1:51

APPROVED
AND
FILED

141

COVER LETTER

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

SUBJECT: SHRUSAIJEE INC.
(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: RAJENDRAKUMAR PATEL
Name (Printed or typed)

1106 E. HILLS BOROUGH AVE.
Address

TAMPA FL 33604
City, State & Zip

813-368-8255 OR
Daytime Telephone number 813-239-1112

ARU1@VERIZON.NET
E-mail address: (to be used for future annual report notification)

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

APPROVED
AND
FILED

Shrisaijee Inc.
Rajendrakumar Patel, PD
1106 E. Hillsborough Ave
Tampa, FL 33604

11 MAY -6 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 20, 2011

Division of Corporations
Amendment Section
P.O. Box 6327
Tallahassee, FL 32314

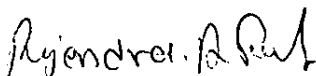
RE: Document #: 09000011139
Shrisaijee Inc.

To Whom It May Concern:

Please let this letter serve as proof that we have no intention of revoking the dissolution of the corporation, Shrisaijee, Inc., therefore releasing the name for use to another entity.

If you require any further information in order to process this request, please contact my CPA, Ron Porat, at 6702 N Gunlock Ave, Tampa, FL 33614. He can be reached via phone at 813-870-0060.

Sincerely,


Rajendrakumar Patel

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: **SHRISAIJEE INC.**

11 MAY -6 PM 1:51

ARTICLE II PRINCIPAL OFFICE

Principal street address

**1106 E. HILLSBOROUGH AVE
TAMPA, FL 33604**

Mailing address, if different is

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY + ALL LAWFUL PURPOSE.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **RAJENDRAKUMAR PATEL, PD** Name and Title: _____
Address: **1106 E HILLSBOROUGH AVE** Address: _____
TAMPA, FL 33604

Name and Title: **ALKABAHEN PATEL VPD** Name and Title: _____
Address: **1106 E. HILLSBOROUGH AVE** Address: _____
TAMPA, FL 33604

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

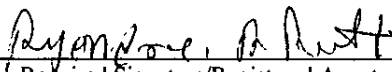
Name: **RAJENDRAKUMAR PATEL**
Address: **1106 E. HILLSBOROUGH AVE.**
TAMPA, FL 33604

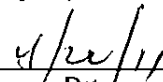
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **RON PORAT**
Address: **6702 N. GUNLOCK AVE**
TAMPA, FL 33614

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


Required Signature/Registered Agent


Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator


Date