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SECRETARY OF STATE
ALLAHYSSEE FLORINA

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COVER LETTER

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

SUBJECT: Sanaa Ink Co.		;
(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 \$78.75 Filing Fee & Certificate of Status \$78.75 \$87.50 Filing Fee & Filing Fee, & Certificate of Status \$20.00 \$878.75 \$87.50 Filing Fee & Filing Fee, & Certificate Copy & Certificate of Status ADDITIONAL COPY REQUIRED		
FROM: Kamau Kihohia Name (Printed or typed)	-	
3025 sw 11th court Address		
Fort Lauderdale City, State & Zip	SEP -6 AH	FILED
(786) 274-0586 Daytime Telephone number	9:15	
Sanaalnk@yahoo.com / E-mail address: (to be used for future annual report notification)		

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 No.	Sanaa Ink Co. oration shall be:		
ARTICLE II P	RINCIPAL OFFICE		
	Principal street address	Mailing ad	dress, if different is:
30:	25 sw 11th court		
	lauderdale, florida 33312		
1911			
ARTICLE III PI			SE SE
	ch the corporation is organized is:		- G
 A for profit busi 	ness selling arts and crafts		
			SSEE SANGE
ARTICLE IV S	HARES		£≥ 'è
The number of shares			AM 9: 15
			» vı
	<u>NITIAL OFFICERS AND/OR DIRECTOR</u>		
Name and Title	:Kamau Kinga Kihohia, President		
Address:	3025 sw 11th court		
	Fort lauderdale, Fl. 33312		
	<u> </u>		
Name and Title		Name and Title:	
Address:	:		
Address:		Address:	
		-	
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Name and Title	:	Name and Title:	
Address:			
11001000			
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	<u>EGISTERED AGENT</u>		
The <u>name and Florid</u>	la street address (P.O. Box NOT acceptable) of		
Name:	Kamau Kinga Kihohia	_	
Address:	3025 sw 11th court	_	
	Fort lauderdale, Fl. 33312		
ARTICLE VII II	POOD BOD A WOD		
	VCORPORATOR SS of the Incorporator is:		
Name:	Kamau Kinga Kihohia		
Address:	3025 sw 11th court	_	
	Fort lauderdale, Fl, 33312	_	
Havina baan namad	as registered agent to accept service of proces	s for the above stated cornor	eation at the place designated in
	aniliar <u>with and accept the appointment as reg</u>		
	ariation was a second the appointment to reg	meren ugern una ugree io ae	i i
			malailani
4	2 10:		CATOHADIL
	Required Signature/Registered Agent		Date ^f
I make the donor	met and affirm that the facts stated because	tours. I some sources that the t	also information submitted in a
	ent and affirm that the facts stated herein are		
иоситени ю іне церо	urtment of <u>State co</u> nstitutes a third degree felon	y us provideu jor in 8.61 /.153	rus. İt
			MOMILDAU
4	Required Signature/Incorporator	 '	01/01/00/