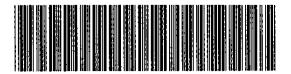


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(Re	questor's Name)	
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HORAGER OF STATE



May 20, 2013

JAMES GRAHAM PO BOX 76067 ST PETERSBURG, FL 33734

SUBJECT: SOLARIS CORPORATION

Ref. Number: W13000029399

We have received your document for SOLARIS CORPORATION and your check(s) totaling \$148.75. 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) 245-6052.

Justin M Shivers Regulatory Specialist II New Filing Section

Letter Number: 713A00012579

COVER LETTER

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

SUBJECT: Surya Investment Corporation (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 Filing Fee

& Certificate of Status

\$78.75 Filing Fee \$87.50 Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: James N. Graham
Name (Printed or typed)
POBOX 76067
Address
ST. PETERSBURG, FL 33734
City, State & Zip
813-546-0089
Daytime Telephone number
GREYHOME@IX NETCOM 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

name of the corporation	,			
RTICLE II PRINCIPAL OFFICE Principal street address		Mailing address, if different is:		
4038 MARGU		POBOX 76067		
	ACH, FL 33708	ST. PETERSBURG, FL 3373		
eticle III PURP e purpose for which th ell, hold, lease	ose e corporation is organized is: to opera e, and manage real estate	te as a investment fi in the corporate na	rm to purchase	
	IAL OFFICERS AND/OR DIRECTORS JAMES N. GRAHAM, CEO	Name and Title:	<u> </u>	
e number of shares of s	itock is: 500	_	MIN TO PA	
e number of shares of s RTICLE V INIT Name and Title Address	JAMES N. GRAHAM, CEO	Name and Title:Address:	JUH-7 PM I	
e number of shares of s RTICLE V INIT Name and Title Address	IAL OFFICERS AND/OR DIRECTORS JAMES N. GRAHAM, CEO POBOX 76067 ST. PETERSBURG, FL 33734	Name and Title:	JUH-7 PM I	
e number of shares of s RTICLE V INIT Name and Title Address Name and Title: Address	IAL OFFICERS AND/OR DIRECTORS JAMES N. GRAHAM, CEO POBOX 76067 ST. PETERSBURG, FL 33734	Name and Title: Address: Name and Title: Address:	JUN -7 PM 1: 19	

	nd Title:	Ivanie and Title.			
Addres		Address:	· · · · · · · · · · · · · · · · · · ·		
	'				
TICLE VI	REGISTERED AGENT				
	Florida street address (P.O. Box NOT acceptable) of	the registered agent is:			
ıme:	JAMES N. GRAHAM				
idress:	14038 MARGUERITE DR				
	MADEIRA BEACH, FL 33708				
RTICLE VII	I INCORPORATOR		5 <u>.</u>	13.097	
e <u>name and</u>	address of the Incorporator is:		5.5.	مين الميناوة ا	
Name:	JAMES N. GRAHAM		7		
Address:	POBOX 76067			PH	
	ST. PETERSBURG, FL 33734			: 19	
aving been n is certificate,	amed as registered agent to accept service of process I am familiar with and accept the appointment as reg	istered agent and agree to act in this c	he place desig capacity 9/13	nated i	
	Required Signature/Registered Agent		Date		
submit this q	focument and affirm that/the facts stated herein are	true. I am aware that the false infort	mation submi	tted in	
cument to th	he Department of State constitutes a thirst degree felor		4/29/13		
	Required Signature/Inforporator		Date	Date	
	Required Signature/Indorporator		Date		