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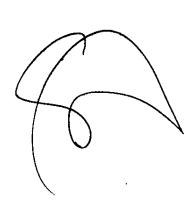
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COVER LETTER

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

SUBJECT: Nisł	na Bhatt, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	d a check for:
■ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: N	isha Bhatt	(Printed or typed)	
94	419 SW 227th Ln	l .	- <u> </u>
C	utler Bay, Florida		
30	05-923-2777	State & Zip	
ni	Daytime Trav20@yahoo.com E-mail address: (to be use	elephone number d for future annual report	notification)
1	NOTE: Please provide the o	riginal and one copy o	f the articles.

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

ARTICLE I NAM The name of the corpora	tion shall be: Nisha Bhatt, Inc.	HINDEN JARY OF
	NCIPAL OFFICE Principal <u>street</u> address	Mailing address, if different sy //: 4, 9
Cutler Bay, FI		
oution buy, it	2 00 100	
ARTICLE III PUR The purpose for which the pu	he corporation is organized is:	orporation is designed to provide
egai sei vices	-	
		- Control of the Cont
	1-441-1-1-1	
ARTICLE IV SHA	LRES stock is: 100	
	rial officers and/or directo : Nisha Bhatt, President	
	9419 SW 227th Ln.	Name and Title:
Address	Cutler Bay, FL 33190	Address:
Name and Title:		Name and Title:
Address		Address:
Name and Title		Name and Title.
		Name and Title:
Address		Address:

Name and	l Title:	Name and Title:	-
Address		Address:	-
ARTICLE VI	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) o	f the registered agent is:	•
Name:	Nisha Bhatt	-	
Address:	9419 SW 227th Ln.	_	
	Cutler Bay, FL 33190	-	
ARTICLE VII	INCORPORATOR		
The name and ad	dress of the Incorporator is:		
Name:	Nisha Bhatt	_	
Address:	9419 SW 227th Ln.	_	
	Cutler Bay FL 33190	· -	
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg	s for the above stated corporation at the place designated gistered agent and agree to act in this capacity	in
- · · · · · · · · · · · · · · · · · · ·	Required Signature/Registered Agent	Date	-
I submit this document to the I	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon Required Signature/Incorporator	true. I am aware that the false information submitted in y as provided for in s.817.155, F.S. Date	a -
	Reduired Signature incorporator	Date	