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DIVISION OF CORPURATIONS

201/22/15

COVER LETTER

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

SUBJECT: I TIE	CHATANI LAW			
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:	
\$70.00	\$78.75	\$78.75	□ \$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	OPY REQUIRED	
D	ΔΥΔΙ ΩΗΔΤΔΝΙ	ESOURE		
FROM:	AYAL CHATANI	e (Printed or typed)		
12	211 N WESTSH	ORE BLVD, S	STE 419	
		Address		

TAMPA, FLORIDA 33607

(914) 261-8106

payalchatani@gmail.com

E-mail address: (to be used for future annual report notification)

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

City, State & Zip

Daytime Telephone number

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

he name of the corporation shall be: THE CHATANI RTICLE II PRINCIPAL OFFICE Principal street address		Mailing address, if different is:	
1211 N WES	TSHORE BLVD		
SUITE 419			
TAMPA, FLC	ORIDA 33607		
ARTICLE III PURP		<u></u>	
	corporation is organized is:		
		AW OFFICE	<u> </u>
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ARTICLE V INITI Name and Title: Address	ock is: ¹ AL OFFICERS AND/OR DIRECTO PAYAL CHATANI, ESQUIRE, PRINCIPA	1	FILEU TARY OF STATE OF CORPORATIO 20 PM 4: 3:
ARTICLE V INITI Name and Title: Address	ock is: 1 AL OFFICERS AND/OR DIRECTO PAYAL CHATANI, ESQUIRE, PRINCIPA 944 HARBOUR BAY DR	L Name and Title:	FILEU TARY OF STATE OF CORPORATIO 20 PM 4: 3:
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ARTICLE V INITI Name and Title: Address Name and Title:	ock is: 1 AL OFFICERS AND/OR DIRECTO PAYAL CHATANI, ESQUIRE, PRINCIPA 944 HARBOUR BAY DR TAMPA, FL 33602	Name and Title: Address: Name and Title:	FILEU TARY OF STATE OF CORPORATIONS 20 PM 4: 37
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Name ar	d Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
	lorida street address (P.O. Box NOT acceptable) of	f the registered agent is:
Name:	RAVI CHATANI	
Address:	1211 N WESTSHORE BLVD, STE 419	_
	TAMPA, FL 33607	on se 15.
ARTICLE VII	INCORPORATOR	SION OF CO
The name and a	ddress of the Incorporator is:	R ROPO
Name:	PAYAL CHATANI, ESQUIRE	STAI ORATI
Address:	1211 N WESTSHORE BLVD, STE 419	37
	TAMPA, FL 33607	_
Having been na this certificate, I	med 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 in eistered agent and agree to act in this capacity
		1/13/15
	Required Signature/Registered Agent	Date
I submit this do	cument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the false information submitted in a sy as provided for in s.817.155, F.S.
	My Ctst (Required Signature/Incorporator	1/19/15
	* L'Required Signature/Incorporator	/ AJate