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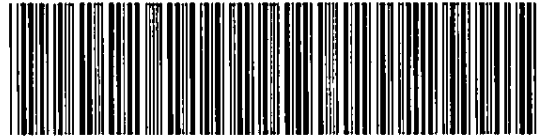
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** Charisma USA Corp

(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      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Anderson Castro, P.A.

Name (Printed or typed)

2103 Coral Way, Suite 800

Address

Miami, FL 33145

City, State & Zip

305-371-3993

Daytime Telephone number

ac@andersoncastrolaw.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 NAME**

The name of the corporation shall be: Charisma USA Corp

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2036 NW 23 Street

Miami FL 33142

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business

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**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Rahul Dua - President

Name and Title: \_\_\_\_\_

Address: SV 1-09 3rd Floor Eldeco Utopia

Address: \_\_\_\_\_

Sector 93-A Noida

Gautam Budh Nagar, U.P. India

Name and Title: Sudershan Dua - Vice President

Name and Title: \_\_\_\_\_

Address: 99, AGCR Enclave

Address: \_\_\_\_\_

Delhi - 110092

Name and Title: Ram Swarup Dua - Secretary & Treasurer

Name and Title: \_\_\_\_\_

Address: 99, AGCR Enclave

Address: \_\_\_\_\_

Delhi - 110092

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: Anderson Castro, P.A.  
Address: 2103 Coral Way, Suite 800  
Miami, FL 33145

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Anderson Castro, P.A.  
Address: 2103 Coral Way, Suite 800  
Miami, FL 33145

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TALLAHASSEE, FLORIDA


**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 02/13/2018 (OPTIONAL)


(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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 02/13/2018  
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 02/13/2018  
Date