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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353 Phone : (800)221-2972

Fax Number : (888)692-9256

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

FLORIDA PROFIT/NON PROFIT CORPORATION BK INTERNATIONAL USA INC.

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September 4, 2018

FLORIDA DEPARTMENT OF STATE

BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

SUBJECT: BK INTERNATIONAL USA LTD

REF: W18000079134

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Remove "LTD " from the entity name.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

PAX Aud. #: H18000256160 Letter Number: 318A00018216

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

ARTICLE I NA The name of the corp		AL USA INC.	
ARTICLE II PR	INCIPAL OFFICE Principal street address VENUE		Mailing address, if different is:
MIRAMAR, FL 33			
ARTICLE III PU The purpose for whi	RPOSE ch the corporation is organized is:	d all lawful purposes	for which a corporation may be formed.
ARTICLE IV SH.			
ARTICLE V INI	TIAL OFFICERS AND/OR DIRECTORS	· 	• •
Name and T	itle: BRIAN TIWARIE, Director 4247 SW 186TH AVENUE	Name and Title Address:	GLORIA TIWARIE, Director 4247 SW 186TH AVENUE
•	MIRAMAR, FL 33029	Address:	MIRAMAR, FL 33029
·			
Name and Ti	tle: BRIAN KYLE TIWARIE, Director 4247 SW 186TH AVENUE	Name and Title	
Address	MIRAMAR, FL 33029	Address:	MIRAMAR, FL 33029
			
Name and Ti	BRIONY GAIL TIWARIE, Director	Name and Title:	ALEXIS ALANA TIWARIE, Director
Address	4247 SW 186TH AVENUE	Address:	4247 SW 186TH AVENUE
	MIRAMAR, FL 33029	· · ·	MIRAMAR, FL 33029

Name and Title:		Name and Title:		
Address		Address:		
		-		
	· · · · · · · · · · · · · · · · · · ·	- ·		
ARTICLE VI	REGISTERED AGENT			
	Torida atreet address (P.O. Box NOT acceptable) of K.V. JAIRAM	of the registered agent is:		
Name:		-	. ,	
Address:	8211 Adrina Shores Way			
	Boynton Beach, FL 33409			
٠.		•		
ARTICLE VII	INCORPORATOR		•	
The name and a	ddress of the Incorporator is:			
Name:	TATYANA KUKULIYEVA			
-	16 COURT ST, 14TH FL	-		
Address:		-	·	
	BROOKLYN, NY 11241	-	•	
ARTICLE VIII	EFFECTIVE DATE:			
(If an effective of	other than the date of filing:	. (OPTIONAL)	or 00 days after the	
filing.)	The state of the s	e ne more man live carys batter i	or yo days after the	
Note: If the date	inserted in this block does not mast the analysis.	Manager Clies and the second	1. 70 .1 0.1	
the document's e	inserted in this block does not meet the applicable flective date on the Department of State's records.	anatutory ning requirements, this	date will not be listed as	
	, , , , , , , , , , , , , , , , , , , ,			
Having been nan	ned as registered agent to accept service of process	for the above stated corporation	at the place designated in	
uns cerujane.	am familia with and accept the appointment as re-	istered agent and agree to act in .	this capacity	
	3 flever		9/11/18	
	Required Signature/Registered Agent		Dato	
I submit this doc document to the i	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon	irue. I am aware that the false live as aroulded for in a \$17.155 F	nformation submitted in a	
0	Allen CUA:	, <u>p mena joe en wez (1893)</u> Ed	9/11/2018	
Requi	red Signature/Incorporator		Date	