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## COVER LETTER

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

SUBJECT: SRI ENTERPRISE & DISTRIBUTION <sup>RS</sup>  
(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 Filing Fee  
☐ \$78.75 Filing Fee  
& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☒ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: GAMINT KITIASIRI JR  
Name (Printed or typed)

3546 HO<sup>14</sup> 297 North St.  
Address

St. Petersburg FL 33713  
City, State & Zip

561-827-0853  
Daytime Telephone number

gsmimi1950@gmail.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: SRI Enterprise & Distributors <sup>ORS</sup> ~~INC~~ <sup>INC</sup>

ARTICLE II PRINCIPAL OFFICE

Principal office address

Gemini P. Kithsiri  
3546 40th way North  
St. Petersburg  
FL 33713

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: doing multiple business  
in Florida. we also distributing multiple  
products to retailers -

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ARTICLE IV SHARES

The number of shares of stock is: 10,0000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gemini Kithsiri

Name and Title: President CEO

Address: 3546 40th way N  
St. Petersburg  
FL 33713

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

Eranga

Name and Title: Eranga Waduge

Name and Title: General manager

Address: 3546 40th way N  
St. Petersburg  
FL 33713

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

Name and Title: Mangala Waduge

Name and Title: Secretary

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

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

Name and Title: Gamini. kithsiri Name and Title: President  
Address: 3546 40<sup>th</sup> way North Address: 3546 40<sup>th</sup> way N  
St. Petersburg St. Petersburg  
FL 33713 FL - 33713

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Erranga Waduge  
Address: 3546 40<sup>th</sup> way North  
St. Petersburg FL 33713

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Gamini P. kithsiri  
Address: 3546 40<sup>th</sup> way North  
St. Petersburg  
FL 33713

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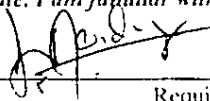
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (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.

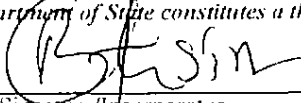
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

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

11/19/18  
Date