## P200000177215

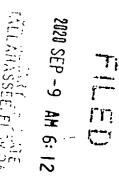
(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Certified Copies Certificates of Status				
Certificates of Status				
Special Instructions to Filing Officer:				





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## **COVER LETTER**

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

CT:	HI ENTERPRISES, INC.	TOTAL NATE AND STREET INTO I	HINE CHEETVA
	(PROPOSED CORPORA	YTE NAME – <u>MUST INCLU</u>	UDE SUFFIX)
ed are an ori	ginal and one (1) copy of the art	ticles of incorporation and	a check for:
<b>Ճ</b> \$70.00	□ \$78.75	□ \$78.75	□ \$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	& Certificate of
		ADDITIONAL CO	Status PY REOUIRED
FROM:	PARUL A. SHAH Nam	e (Printed or typed)	ALL
FROM:	Nam 2305 FAIRWAY LANE		IAL A
FROM:	Nam 2305 FAIRWAY LANE	•	TALL AREAS SE
FROM:	Nam 2305 FAIRWAY LANE		IALLAHASSEE, F
FROM:	Nam 2305 FAIRWAY LANE SEBRING, FL 33872		
FROM:	Nam 2305 FAIRWAY LANE SEBRING, FL 33872	Address	£13,
FROM:	2305 FAIRWAY LANE  SEBRING, FL 33872  City  (863) 382-0192	Address	# <b>7</b> 6: <b>-</b>
FROM:	2305 FAIRWAY LANE  SEBRING, FL 33872  City  (863) 382-0192	Address  State & Zip  Telephone number	# <b>7</b> 6: <b>-</b>

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 NA! The name of the corp	ME oration shall be: ABHI ENTERPR	ISES, INC.	
<u>ARTICLE II PRI</u>	NCIPAL OFFICE Principal street address	4	Mailing address, if different is:
2305 FAIRW	VAY LANE		
SEBRING,	FL 33872		
ARTICLE III PUL The purpose for which	RPOSE ch the corporation is organized is:	<del></del>	
ARTICLE IV SH. The number of shares			2020 SEP -9
	TIAL OFFICERS AND/OR DIRECTORS		DADUL A CHAU DECOMPANA
Name and T	Title: ABHLA SHAH, PRESIDENT		
Address	2305 FAIRWAY LANE SEBRING, FL 33872	Address:	2305 FAIRWAY LANE N
		<del></del>	
Name and T	itle:	Name and Title:	
Address		Address:	
Name and T	itle:		
Address		Address:	
		_	

Name an	d Title:	Name and Title:
Address		Address:
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptabl	e) of the registered agent is:
Name:	PARUL A SHAH	<del></del>
Address:	2305 FAIRWAY LANE	
	SEBRING, FL 33872	<del></del>
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	2020 SEP -9 AM 6: 13 FALLAHASSEE, FLORIO
The name and ac	ddress of the Incorporator is:	CS - G
Name:	PARUL A SHAH	
Address:	2305 FAIRWAY LANE	
	SEBRING, FL 33872	
Effective date, if	EFFECTIVE DATE: other than the date of filing: late is listed, the date must be specific and ca	. (OPTIONAL) annot be more than five days prior or 90 days after the
Note: If the date the document's e	inserted in this block does not meet the applic effective date on the Department of State's reco	cable statutory filing requirements, this date will not be listed as ords.
	ned as registered agent to accept service of proc familiar with and accept the appointment as reg	ess for the above stated corporation at the place designated in the gistered agent and agree to act in this capacity
	Required Signature/Registered Agent	1 9 1 Date
		are true. I am aware that the false information submitted in
	fore A & no	M 9/1/20
Required Signatu	ire/Incorporator V	Date