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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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SPECIA INSTRU	AL UCTIONS:				

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

			
RTICLE II PRIN	Principal street address	4614 A	Mailing address, if different is: VENUE LONGCHAMPS
T PETERSBURG, F	L 33710		FL 33558
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RTICLE III PURI	POSE Any la the corporation is organized is:	wful purpose	
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RTICLE IV SHAR	f stock is:		
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ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: 4614 AVENUE LONGCHAMPS LUTZ, FL 33558 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: NIRAV PATEL Address: 4614 AVENUE LONGCHAMPS LUTZ, FL 33558 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: NIRAV PATEL Address: 4614 AVENUE LONGCHAMPS LUTZ, FL 33558 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (IOPTIONAL) (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 list 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 design this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity AVA AVIANCES Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that the facts information submitted document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Date Required Signature/Incorporator	Name ar	d Title:	Name and Title:	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: NIRAV PATEL Address: LUTZ, FL 33558 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: NIRAV PATEL Address: LUTZ, FL 33558 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (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 list 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 design this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Address: All 1720 Address: All 192023 All 192023	Address		Address:	
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LUTZ, FL 33558 ARTICLE VIIIEFFECTIVE DATE: Effective date, if other than the date of filing:	Name:	NIRAV PATEL	_	
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:	Address:	4614 AVENUE LONGCHAMPS		
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