P25000043728

KC
8-5-25

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: SHRIHIR 78 INC
(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: Vijay Patel
Name (Printed or typed)

10999 Lothmore Road
Address

Jacksonville FL 32221
City, State & Zip

904 327 2589
Daytime Telephone number

missu36jax@yahoo.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: SHRIHIR 78 INC

ARTICLE II PRINCIPAL OFFICE

Principal **street** address
Vijay Patel
10999 Lothmore Road
Jacksonville FL 32221

Mailing address, if different is:
10999 Lothmore Road
Jacksonville FL 32221

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Property

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Vijay Patel
Address 10999 Lothmore RD
Jacksonville FL
32221

Name and Title:
Address:

Name and Title:
Address

Name and Title:
Address:

Name and Title:
Address

Name and Title:
Address:

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: Vijay Patel

Address: 10999 Lothmore RD
Jacksonville FL 32221

ARTICLE VII INCORPORATOR

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

Name: Vijay Patel

Address: 10999 Lothmore RD
Jacksonville FL 32221

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

Vijay Patel — Required Signature/Registered Agent

8-5-2025 — 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.

Vijay Patel — Required Signature/Incorporator

8-5-2025 — Date