

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

400001466064 -04/27/95--01019--007 ****131.25 ****131.25

`	. Toposed corporate	name - must include suffix)		
Enclosed is an origina	l and one (1) co	py of the articles of incorporat	ion and a check	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	Filing Fee Filing Fee & Certified Copy Certified Copy & Certifica Additional Copy Required	25 3,	
FROM:	KAM /Name (PAN SHAH CAL	D/	
	2909	Bay VISTA	Are	
Address				
	TAMPA, F1 33611 5/95			
City, State & Zip				
		3 1- 7 3 92 elephone number		

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida? Corporation Act, hereby adopt(s) the following Articles of Incorporation.

> ARTICLE I NAME

The name of the corporation shall be:

K & F OF TAMPA INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2909 BAY VISTA AVE TAMPA , F1 33611

> ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time

1000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

> KAMRAN SHAHGALDI 2909 BAY VISTA AVE TAMPA - Fl 33611

ACTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

2909 BAY VISTA TAMPA, Fl 33611

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

_04 da 91 Signature Signature Signature

NOTE: Affix ng an officer title after a signature of an incorporator does not constitute the

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURS: ANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATE TIES, THE UNDER SIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORI A, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFIC REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The ame of the	corporation is: K & F OF TAMPA INC	
2. The same and a	ddress of the registered agent and office is:	
	KAMRAN SHAHGALDI	
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	
	TAMPA F/ 33611 (CITY/STATE/ZIP)	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(DATE) 4-24-95