

P96000045943

SAVITRI D. GOSINE

Requestor's Name

1502 N.E. 147th St.

Address

Miami, FL 33161

City/State/Zip

Phone #

11:00 AM  
-05/24/2006  
\*\*\* 70.00 \*\*\*

STATE  
FLOIDA  
23  
7:15

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. SAVITRI SHOE STORE #2, Inc.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in    ☐ Pick up time \_\_\_\_\_    ☐ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

5/6/06  
TB

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

ARTICLES OF INCORPORATION  
OF  
SAVITRI SHOE STORE #2, INC.

We, the undersigned, all of whom are of legal age, do hereby associate ourselves for the purpose of becoming a corporation under the laws of the State of Florida authorizing the formation of corporations.

ARTICLE I

The name of this corporation shall be:

SAVITRI SHOE STORE #2, INC.

ARTICLE II

The purpose is to engage in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE III

It shall have the authority to issue 100 shares of stock, all of one class, with \$6.00 par value.

ARTICLE IV

The corporation shall begin with \$600.00 capital.

ARTICLE V

The period of its duration is perpetual.

ARTICLE VI

The address of its principal office is:  
4556 NW 183rd ST MIAMI, FL 33055

ARTICLE VII

The number of directors constituting its initial Board of Directors is whose name(s) and address(es) is(are):

SAVITRI O. GOSINE  
4556 NW 183RD ST  
MIAMI, FL. 33055  
305 (757-0676)

RISHI B. GOSINE  
4556 NW 183RD ST.  
MIAMI, FL. 33055

ARTICLE VIII

The name and address of the subscriber is:

SAVITRI O. GOSINE  
1562 NE 149TH ST. MIAMI, FL. 33161

ARTICLE IX

Permanent agent and address for the corporation is:

SAVITRI O. GOSINE  
1562 NE 149TH ST , MIAMI, FL. 33161

ARTICLE X

Shareholders shall be entitled to preemptive rights.

Savitri O. Gosine.  
SAVITRI O. GOSINE

Dated: 5-20-96

STATE OF FLORIDA

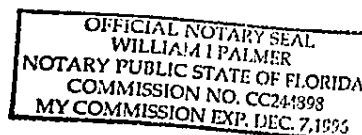
COUNTY OF DADE

BEFORE ME, the undersigned authority personally appeared SAVITRI O. GOSINE who is well known to me to be the person described in and who subscribed the above Articles of Incorporation, and he freely and voluntarily acknowledges before me according to law that he made and subscribed the same for the purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and seal at Dade County, Florida, this 20 day of MAY, 1996.

William I. Palmer  
Notary Public, State of Florida

My commission expires:



CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE  
SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM  
PROCESS MAY BE SERVED.  
IN COMPLIANCE WITH SECTION 40.091, FLORIDA STATUTES, THE  
FOLLOWING IS SUBMITTED:

FIRST THAT SAVITRI SHOE STORE #2, INC. DESIRING TO ORGANIZE OR  
QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS  
PRINCIPAL PLACE OF BUSINESS AT CITY OF MIAMI, STATE OF FLORIDA  
HAS NAMED SAVITRI O. GOSINE AS ITS AGENT TO ACCEPT SERVICE OF  
PROCESS WITHIN FLORIDA.

Signature Savitri O. Gosine  
SAVITRI O. GOSINE

Title PRESIDENT

Date 5. 20. 96.

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE  
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE,  
I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO  
COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE  
PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

Signature Savitri O. Gosine  
SAVITRI O. GOSINE

Date 5. 20 96