

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870

Mailing Address: Post Office Box 10349, Tallahassee, FL 32302

TOLL FREE No. 1-800-342-8062

FAX (904) 222-1222

NAME _____

FIRM _____

ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

REQUEST TAKEN CONFIRMED APPROVED

DATE _____

TIME _____ CK No. _____

BY AAAP _____

WALK-IN Will Pick Up 2/5 11:00 AM 2/5

RE: Sandram Associated

Agencies, Inc.

	C.C. FEE.	DISBURSED
Capital Express™		
Art. of Inc. File		
Corp. Record Search		
Ltd. Partnership File		
Foreign Corp. File		
(T) Cert. Copy(s)		
Art. of Amend. File		
Dissolution/Withdrawal		
C U S-		
Fictitious Name File		
Name Reservation	-02/05/97--01044--015	
Annual Report/Reinstatement	***122.50	***122.50
Reg. Agent Service		
Document Filing		
Corporate Kit		
Vehicle Search		
Driving Record		
Document Retrieval		
UCC 1 or 3 File		
UCC 11 Search		
UCC 11 Retrieval		
File No.'s, Copies		
Courier Service		
Shipping/Handling		
Phone ()		
Top Priority		
Express Mail Prep.		
FAX () pgs.		

SUBTOTALS _____

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum.

THANK YOU
from
Your Capital Connection

**ARTICLES OF INCORPORATION
OF
SANGAM ASSOCIATED AGENCIES, INC.**

FILED
97 FEB -5 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as Incorporators pursuant to Chapter 607 of the Florida Statutes, adopt the following Articles of Incorporation.

ARTICLE I. NAME

The name of this Corporation is **SANGAM ASSOCIATED AGENCIES, INC.**

ARTICLE II. DURATION

The period of its duration is perpetual, beginning from the date these Articles are filed with the State of Florida, Secretary of State.

ARTICLE III. PURPOSE

The general purpose of the business to be transacted by this Corporation is to engage in any activity or business permitted under the laws of the United States and the State of Florida, and to effectuate such purposes it may act in any capacity including as an agent or attorney-in-fact for any person or entity.

ARTICLE IV. CAPITAL STOCK

This Corporation is authorized to issue 10,000 shares of common stock, all of one class, at \$15.00 par value, which will all be designated "common shares".

ARTICLE V. PREEMPTIVE RIGHTS

A. Each of the shareholders agrees not to sell, transfer, pledge, assign or otherwise in any way dispose of his or her shares

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of SANGAM ASSOCIATED AGENCIES, INC.
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unless and until he or she shall have offered to sell his or her shares to the other shareholders at a fair and reasonable price.

B. All additional shares of common stock issued by the Corporation will be subject to the same restrictions regarding transferability as the initial stock.

C. The holders of common shares will be entitled to purchase newly issued stock proportionate to their respective holdings prior to the stock being offered to outside subscribers.

**ARTICLE VI. INITIAL PRINCIPAL OFFICE
AND MAILING ADDRESS OF CORPORATION**

The street address of the initial principal office of this Corporation is 7616 Southland Blvd., S. 105-D, Orlando, Florida 32809.

The initial mailing address of this Corporation is 7616 Southland Blvd., S. 105-D. Orlando, Florida, 32809.

**ARTICLE VII. INITIAL REGISTERED AGENT
OF CORPORATION AND ADDRESS OF REGISTERED AGENT**

The name of the initial registered agent of this Corporation is PHILIP F. BONUS, and the address of this initial Registered Agent is 170 East Washington St., Orlando, Florida 32801.

ARTICLE VIII. INITIAL BOARD OF DIRECTORS

This Corporation will have one (1) director initially. The number of directors may either be increased or diminished from time

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to time by the Bylaws but will never be less than one (1). The name and address of the initial director of this Corporation is:

ARTICLE IX. INCORPORATOR

The name and address of the person signing these Articles as Incorporator is:

SWAMY SHIVANANDA
7616 Southland Blvd., S. 105-D
Orlando, Florida 32809

ARTICLE X. BYLAWS

The power to adopt, alter, amend or repeal Bylaws will be vested in the Board of Directors and the shareholders.

ARTICLE XI. MANAGEMENT BY SHAREHOLDERS

All corporate powers will be exercised by or under the authority of, and the business affairs of this Corporation will be managed under the direction of, the shareholders of this Corporation.

DATED: FEB. 04, 1997.

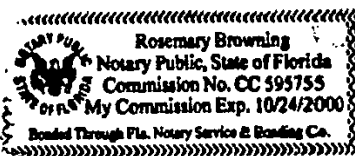
Swamy Shivananda
SWAMY SHIVANANDA, Incorporator

STATE OF FLORIDA
COUNTY OF ORANGE

4th The foregoing instrument was acknowledged before me this day of February, 1997, by SWAMY SHIVANANDA, who is described as Incorporator, and who executed the foregoing Articles

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of SANGAM ASSOCIATED AGENCIES, INC.
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of Incorporation, and acknowledged before me that he subscribed to
such Articles of Incorporation for the purposes therein described.



Rosemary Browning
(Signature of Notary Public - State Florida)

Rosemary Browning
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known _____ OR Produced Identification ☒

Type of Identification Produced FL DL S155-780-57-383-D

ACCEPTANCE OF DUTIES OF REGISTERED AGENT

I HEREBY ACCEPT the designation, duties, and responsibilities
as REGISTERED AGENT of SANGAM ASSOCIATED AGENCIES, INC., and agree
to comply with all provisions of the Florida Statutes, and/or any
other applicable laws related thereto.

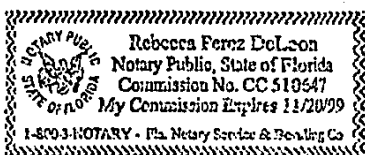
Philip F. Bonus
PHILIP F. BONUS
Registered Agent

STATE OF FLORIDA
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this _____
day of March, 1997, by PHILIP F. BONUS described as the
REGISTERED AGENT for SANGAM ASSOCIATES AGENCIES, INC., and who

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of SANGAM ASSOCIATED AGENCIES, INC.
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executed the foregoing designation as REGISTERED AGENT for the
purposes therein expressed.




(Signature of Notary Public - State Florida)

REBECCA PEREZ DELEON
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known ☒ OR Produced Identification _____

Type of Identification Produced _____