TRANSMITTAL LETTER

P98000051972

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

SUBJECT:	MASHAHALLA					
(Proposed corporate name - must include suffix)						
		, . 9 (20002 -06/08 *****1	3/9803	1086	9——8 -013 122.50
Enclosed is an original	and one(1) copy of the articles	of incorporation and a	check for:		_	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	₩\$122.50 Filing Fee & Certified Copy	Siling Fe Certified & Certif	ee, I Copy		
	-	ADDITIONAL CO	AL COPY REQUIRED			
FROM: _	AZIZ BHULLAR OR ALLOU Name (Pr	JDIN BHULLAR inted or typed)			1	·
	4701 N. W. 167th St.			_		
_	Address			SEGRETI ALLAHA	8- NOF 86	APP
	MIAMI, FL 33055 City, State & Zip			ARY OF SSEE, F	. P	ROVED
_	305-625-3391 Daytime Te	lephone number		STATE	2: 32	

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be:

MASHAHALLA, INC.

PRINCIPAL OFFICE ARTICLE II

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

4701 N. W. 167th St. 33055 Miami, Fl

SHARES ARTICLE III

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

FIVE HUNDRED (500) SHARES AT ONE DOLLAR (\$1.00) PAR

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

AZIZ BHULLAR 900 GREENBRIAR AVE. DAVIE, FL 33325

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

AZIZ BHULLAR 900 GREENBRIAR AVE. DAVIE, FL

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent

Date