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

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee **☎** \$78.75 & Certificate

\$122.50

\$131.25

Filing Fee

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

SIVA R. KRISHNA
Name (Printed or typed)

5100 BURCHETTE #2702

TAMPA, FL. 33647
City, State & Zip

(813) 971-1262 Daylime Telephone number

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 NAME The name of the corporation shall be:

WEEKEND

ARTICLE II PRINCIPAL OFFICE

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

BURCHETTE #2702

TAMPA, FL. 33647

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

100(ONE HUNDRED)

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

5100 BURCHETTE 井2702 R. KRISHNA

TAMPA, FL. 33647 *INCORPORATOR*

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

R. KRISHNA 5100 BURCHETTE #2702

TAMPA, FL. 33647

Liva R. Krishva

(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 30 JUN 98

Signature/Registered Agent