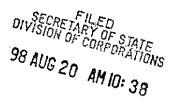
19800013288



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

SUBJECT: POLAT INTERDATIONAL, INC.			
	(Proposed corp	orate name - must include su	ffix)
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a c	40000 ******
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate
FROM:	SEVEL POLAT Name (Printed or typed) 3806 DONTH UDIVEYSITY DRIVE		
	SUDRISE, FL City,	Address	· · · · · · · · · · · · · · · · · · ·
954 - 578 - 0166 Daytime 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:

POLAT INTEVDATIONAL, INC.

ARTICLE II PRINCIPAL OFFICE

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

3806 DOTH UNIVERSITY DRIVE SUNRISE, FL 33351

ARTICLE III SHARES

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

100 (ONE HUDDRED)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

SEYGI POLAT (SAME AS AROVE)

ARTICLE V INCORPORATOR

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

SEYNI POLAT (SAME AS ABOVE)

Signature/Incorporator

Doto

(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