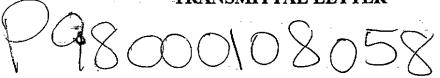
### TRANSMITTAL LETTER



Department of State

Division of Corporations	
P. O. Box 6327	\$000000000000000 A
Tallahassee, FL 32314	6000027245764 -12/29/9801029002
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	rate name - must include suffix)  7  7  7  7  7  7  7  7  7  7  7  7  7
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	E P T
Enclosed is an original and one(1) copy of the articles	s of incorporation and a check for:
	## <b>=</b>
<b>□</b> \$70.00 <b>□</b> \$78.75	□\$122.50 □ \$131.25 Þ
Filing Fee Filing Fee	Filing Fee,
& Certificate	& Certified Copy Certified Copy & Certificate
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	ADDITIONAL COPY REQUIRED
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FROM: Rizwan A. Name (Pi	Khatri
name (Fi	miled or typed)
6329 A W N	ENBERRY PJ
A	Address
GATNESV, TIE City,	·
City,	State & Zip
20, 23/ 5	<b>, 7–7</b>
354-33/- 57 Daytime To	elephone number

DEC 30 1998

SHARON

### 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:

ARTICLE II	PRINCIPAL OFFIC
•	

RKFASHTON INC

The principal place of business and mailing address of this corporation shall be: 6329 A WNEWBERRY Rd

GATNESVILLE FL

#### ARTICLE III SHARES

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

100

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

RIZWAN A KhATRI. 6329 A West NewBerry Rd GATNESVILLE F1 3 V605

## ARTICLE V INCORPORATOR

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

RIZWAN A. KhAtRI 6329 A W. NewBerry Rd GAINES VILLE FI 32605

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