## 179000011874

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

Enclosed

SUBJECT: HKSinLimite Incorporated
(Proposed corporate name - must include suffix)

100002861191--0 -05/04/99--01009--011 \*\*\*\*\*87.50 \*\*\*\*\*\*87.50

ed is an origin	al and one(1) copy of the articles	s of incorporation and a c	check for:		
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified C & Certifica Status PY REQUIR	Copy ate of	
FROM:	HARI Ken Sin	inted or typed)			
	202 Jameston	address		99 MAY -3 SECRETARY TALLAHASSE	
	Winter Park, Fi	し 32792			FILED
	(407) 677 - 8509 Daytime T	elephone number	<del></del>	PM 4:46 UF STATE E. FLORIDA	

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

## ARTICLES OF INCORPORATION

NAME

ARTICLE I

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

The name of the corporation shall be: HKS in Limite Incorporated ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: Jamestown Drive Whiter Park FL 32792 <u>ARTICLE III SHARES</u> The number of shares of stock that this corporation is authorized to have outstanding at any one time is: Hari Singh 200 1000 (9 \$1.00 Radhy Dern 200 Havi Ken Singh 510 Leonardo West 90 ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: Havi Kun Singh 202 Jamestown Drive Winter Park FL 32792 ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: 202 James town Winter Part, EL

(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

Signafure/Registered Agent

Signature/Incorporator

4-29-99

Date

Date

نن.

