99900053956

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

700002860417--4 -05/03/99--01111--008 ******70.00 ******70.00

SUBJECT:

Nita Inc. 05 Shith Petersburg (Proposed corporate name – must include suffix)

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

(\$\$70.00

() \$78.75

() \$122.50

() \$131.25

FROM:

Kirit Patel

Name (printed or typed)

3635 Beach Dr., S.E.

Address

St. Petersburg, FL 33705

City, State, & Zip

(813) 821-6482

Daytime Telephone Number

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



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 7, 1999

KIRIT PATEL 3635 BEACH DR. S.E. ST.PETERSBURG, FL 33705

SUBJECT: NITA INC.

Ref. Number: W99000010711

We have received your document for NITA INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

I called the number listed and spoke with a Gentleman that could not speak English very well. He did not have a another telephone number that I might could have contacted you and hung up on me before I could leave my name and telephone number.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6930.

Carolyn Batten Document Specialist

Letter Number: 699A00025059

Articles of Incorporation

Of

Nita Inc. OF SAINT PETERSBURG

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

ARTICLE I NAME

The name of the corporation shall be:

Nita Inc. of Saint Petersburg

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation sall beg

3635 Beach Dr., S.E. St. Petersburg, FL 33705

ARTICLE III SHARES

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

100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is

Kirit Patel 3635 Beach Dr., S.E. St. Petersburg, FL 33705

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Africies of incorporation is (arc).			
Kirit Patel 3635 Beach Dr., S.E. St. Petersburg, FL 33705	-		
Nita Patel 3635 Beach Dr., S.E. St. Petersburg, FL 33705	_	- 	
•			
•			
The undersigned incorporator(s) h	nas(have) executed these Artic	cles of Incorporation this	
2715 _Day of	Apr., 1	9 <u>179</u> .	
K	i'n i to Betol Signature		
alila	Portal . Signature	· · · · · · · · · · · · · · · · · · ·	

Articles of Incorporation Filing Fee - \$35

Signature

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE / REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: Nita Inc. of Saint Petersburg
- 2. The name and address of the registered agent and office is:

Kirit Patel 3635 Beach Dr., S.E. St. Petersburg, FL 33705



Having been named as the 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.

Kinitonlato

Signature

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL