

TRANSMITTAL LETTER

P99000060947

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

SUBJECT: C D Ashirwad, Inc.  
(Proposed corporate name - must include suffix)

200002926302--5  
-07/08/99--01054--001  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate  
Status

ADDITIONAL COPY REQUIRED

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 JUL -8 AM 11:17

FILED

RECEIVED

99 JUL -8 AM 11:11

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FROM: Mitesh N. Patel  
Name (Printed or typed)

1000 Broward Rd. Island Pt Apt. 1101  
Address

Jacksonville Fl. 32218  
City, State & Zip

\_\_\_\_\_  
Daytime Telephone number

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

1/2/99 TC



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

June 29, 1999

MITESH N. PATEL  
1000 BROWARD RD., ISLAND PT. APTS., #1101  
JACKSONVILLE, FL 32218

SUBJECT: C.M. OF JACKSONVILLE, INC.  
Ref. Number: W99000015116

We have received your document for C.M. OF JACKSONVILLE, 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 and left my name and telephone number but I never received a return call.

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: 799A00034305

## ARTICLES OF INCORPORATION

*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:

CD Ashirwad, Inc.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FILED

### ARTICLE II PRINCIPAL OFFICE

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

1000 BROWARD RD. ISLAND PT. APTS # 1101  
JACKSONVILLE, FL 32218

### 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 address of the initial registered agent is:

MITESH N. PATEL  
1000 BROWARD RD., ISLAND PT. APTS # 1101  
JACKSONVILLE, FL 32218

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MITESH N. PATEL

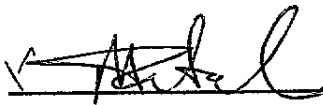
1000 BROWARD RD. , ISLAND PT APTS #1101

JACKSONVILLE, FL 32218

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

18<sup>th</sup> day of JUNE, 19 99.

(An additional article must be added if an effective date is requested.)



Signature

Signature

Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 C.D. Ashirwad, Inc.

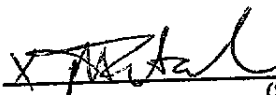
2. The name and address of the registered agent and office is:

MITESH N. PATEL  
(NAME)

1000 BROWARD RD. APT # 1101 ISLAND PT. APTS  
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

JACKSONVILLE FL 32218  
(CITY/STATE/ZIP)

*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.*

X   
(SIGNATURE)

6/19/99  
(DATE)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA