

P130000042440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

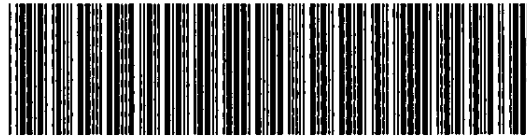
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800247753408

05/09/13--01019--013 \*\*78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 MAY -9 AM 8:52

Ps 5/14/13

## COVER LETTER

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

SUBJECT: **Khaki Blue Bones, Inc.**

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are 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 of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: **Victor R Holloway**

Name (Printed or typed)

**318 Settlers Lane**

Address

**Charlotte, NC 28202**

City, State & Zip

**949.374.0267**

Daytime Telephone number

**vholloway@atomicgroup.com**

E-mail address: (to be used for future annual report notification)

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

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME**  
The name of the corporation shall be: Khaki Blue Bones, Inc.

13 MAY -9 AM 8: 52

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2637 E. Atlantic Blvd Suite 15323  
Pompano Beach, FL 33062

Mailing address, if different is:

318 Settlers Lane  
Charlotte, NC 28202

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Beverage and snack distribution

**ARTICLE IV SHARES**  
The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Victor Holloway, President

Address: 318 Settlers Lane  
Charlotte, NC 28202

Name and Title: Tom DuBransky, Secretary

Address: 912 Palmview Dr  
Los Angeles, CA 90042

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

FILED (cont.)  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

13 MAY -9 AM 8:53

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:


Name: Victor Holloway, c/o Casey Key Marina  
Address: 482 Blackburn Point Road  
Osprey, FL 34229

**ARTICLE VII INCORPORATOR**


The **name and address** of the Incorporator is:

Name: Victor Holloway  
Address: 318 Settlers Lane  
Charlotte, NC 28202

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

 5-6-2013  
Required Signature/Registered Agent Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

 5-6-2013  
Required Signature/Incorporator Date