

N11000004811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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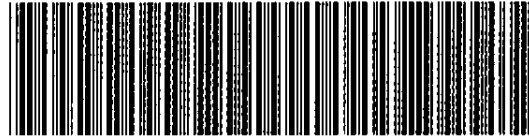
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2011 MAY 16 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L Burch MAY 17 2011

COVER LETTER

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

SUBJECT: Key Solutions International, Inc.
(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
Filing Fee

☒ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Dorothy Herron
Name (Printed or typed)

4731 Lakewood Blvd.
Address

Naples, FL 34112-5021
City, State & Zip

859-654-1016
Daytime Telephone number

keysolutionsintl@gmail.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 617, F.S., (Not for Profit)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2011 MAY 16 PM 4:51

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ARTICLE I NAME

The name of the corporation shall be: **Key Solutions International, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different

4731 Lakewood Blvd
Naples, FL 34112-5021

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation is organized exclusively for charitable, religious, educational, literary, and scientific purposes within the meaning of Section 501(c)(3) of the IRS Code or corresponding provision of any future United States IRS law.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:
Directors are to be elected by majority two-thirds vote.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Dorothy Herron, Founder/President</u>	Name and Title: <u>Douglas Keim, Director</u>
Address: <u>4731 Lakewood Blvd.</u>	Address: <u>526 Eisenhower Dr.</u>
<u>Naples, FL 34112-5021</u>	<u>Pt. Pleasant, NJ 08742</u>

Name and Title: <u>Michael Herron, Co-founder/Secy</u>
Address: <u>4731 Lakewood Blvd.</u>
<u>Naples, FL 34112-5021</u>

Name and Title: <u>Lias Odell, Vice President</u>
Address: <u>2/F, 99 Jade Villa</u>
<u>Ngau Liu</u>
<u>Sai Kiung, Hong Kong</u>

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Dorothy Herron
Address: 4731 Lakewood Blvd.
Naples, FL 34112-5021

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dorothy Herron
Address: 4731 Lakewood Blvd.
Naples, FL 34112-5021

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

Dorothy Herron

Required Signature of Registered Agent

5/11/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

Dorothy Herron

Required Signature of Incorporator

5/11/11
Date