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



SUBJECT:	KSR	(Proposed corporate name - must include suffix)	
		(Proposed corporate name - must include suffix)	-12/29/9901042010

*****78.75 *****78.75

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

\$70.00	Filin
Filing Fee	Filin

□\$78.75	\$87.50	
Filing Fee	Filing Fee,	
& Certified Copy	Certified Copy & Certificate of	

Status

ADDITIONAL COPY REQUIRED

FROM:	RSR ENTERPRISES INC. Name (Printed or typed)		
	Name (Printed or typed)		
	P.O. Box 20841		
	Address		

St. Feters burg. Fr 33742-084/

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

FILED

ARTICLES OF INCORPORATION

1999 DEC 29 PM 17- 19

The undersigned incorporator, for the purpose of forming a corporation under the Florida

Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

<u>ARTICLE I</u>	NAME

The name of the corporation shall be:

KSR ENTERPLISES, Inc.

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 20841 St. Petersburg, Fr 33792

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000

<u>INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

The name and Florida street address of the initial registered agent are:

FL TAX MAN, INC. Jeffrey A. Schneider, MST 4944 N. University Dr. Lauderhill, FL 33351-5748

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

FL TAX MAN, INC. Jeffrey A. Schnelder, MST 4944 N. University Dr. Lauderhill, FL 33351-5748

Signature/Incorporator

Effective 1/1/00

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

Signature/Registered Agent