

P00000046189

TRANSMITTAL LETTER

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

400003240264--2
-05/05/00--01022--003
*****87.50 *****87.50

SUBJECT: CROSS KEYS VENTURES 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 of
Status
ADDITIONAL COPY REQUIRED

FROM: ALFRED O. KESHINRO
Name (Printed or typed)

14899 NE 18th AVE, Apt #2P
Address

MIAMI FL 33181
City, State & Zip

(305) 940-5287
Daytime Telephone number

FILED
00 MAY -5 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

ARTICLE I NAME

The name of the corporation shall be:

CROSS KEYS VENTURES INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14899 NE 18TH AVE, APT 2 P
MIAMI FL 33181

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY OR ALL LAWFUL BUSINESS
TELECOMMUNICATION, OFFICE EQUIPMENT, BUSINESS SUPPLIES
IMPORT & EXPORT - & CONSULTANCY

ARTICLE IV SHARES

The number of shares of stock is:

10,000. SHARES

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ALFRED O. KESHINRO
14899 NE 18TH AVE - APT 2 P
MIAMI FL 33181

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ALFRED O. KESHINRO
14899 NE 18TH AVE, APT #2 P
MIAMI FL 33181

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALFRED O. KESHINRO
14899 NE 18TH AVE APT #2 P
MIAMI FL 33181

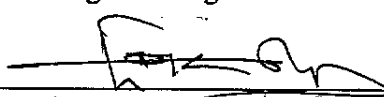
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

4/29/00

Date



Signature/Incorporator

4/29/00

Date

FILED
00 MAY -5 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA