TRANSMITTAL LETTER 100000094683

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

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SUBJECT:	KFU INC			
Enclosed is an original and		E NAME – <u>MUST INCLUD</u> les of incorporation and a	AHASSEE. TE	OF STATE OF
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate	
FROM: _	Name (Pi	inted or typed)	•	
	ACCT & BKKG BY COLLICO 3606 CENTRAL AVENUE ST PETERSBURG FL 33711		· · · · · · · · · · · · · · · · · ·	
	City,	State & Zip		
	(727)896-1040 Daytime Telephone number		en e sua usa	
NOTE	C: Please provide the or	iginal and one copy of t	he articles.	

ARTICLES OF INCORPORATION In Compliance with Chapter 617, F.S., (Not for Profit) ARTICLE I NAME The name of the corporation shall be: KFU INC ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 19105 US HWY 19 NORTH

FILED 00 OCT -5 PM 3: 07 SECRETARY OF STATE TALLAHASSEE, FLORIDA

The principal place of business and mailing address of this corporation shall 19105 US HWY 19 NORTH

APT E 3

CLEARWATER FL 33764

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL BUSINESS

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

1,000

ARTICLE V INITIAL DIRECTORS OFFICERS
The name and addresses:

KATHREEN MKPARU/PRESIDENT UDO 'MKPARU/VICE PRESIDENT

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the registered agent is:

DONALD R COLLINS 3606 CENTRAL AVENUE ST PETERSBURG FL 33711

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KATHREEN MKPARU 19135 US HWY 19 NORTH APT E 3 CLEARWATER FL 33764

Signature/Registered Agent

Signature/Incorporator

Date

9/27/00

Date