

TRANSMITTAL LETTER

P00000098281

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

FILED
00 OCT 17 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200003427612--9
-10/17/00--01063--005
*****87.50 *****87.50

SUBJECT: K-2 Capital Corp.

(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 ☐ \$ 78.75
Filing Fee Filing Fee
& Certificate of Status

☐ \$ 78.75 ☒ \$ 87.50
Filing Fee, Filing Fee,
Certified Copy Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Kevin Stein

Name (printed or typed)

10240 Woodford Bridge Street

Address

Tampa, FL 33626

City, State & Zip

813-920-2072

Daytime Telephone number

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

D. BROWN OCT 18 2000

ARTICLES OF INCORPORATION

The undersign incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

K-2 Capital Corp.

ARTICLE II PRINCIPAL OFFICE

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

**10240 Woodford Bridge Street
Tampa, FL 33626**

ARTICLE III SHARES

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

10,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

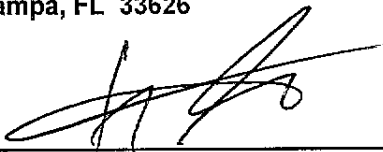
The name and Florida street address of the initial registered agent are:

**Kevin Stein
10240 Woodford Bridge Street
Tampa, FL 33626**

ARTICLE V INCORPORATOR

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

**Kevin Stein
10240 Woodford Bridge Street
Tampa, FL 33626**



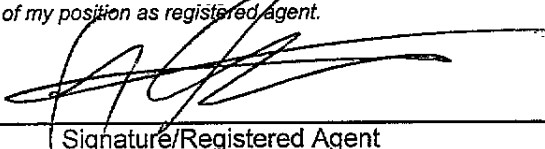
Signature/Incorporator

October 6, 2000

Date

(An additional article must be added if an effective date is requested.)

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

October 6, 2000

Date

FILED
00 OCT 17 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA