Tallahassee, FL 32314



S70.00 S78.75
Filing Fee & Certificate of Status

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

ADDITIONAL COPY REQUIRED

KIcofpalm, Inc. Name (Printed or typed)	900	004 0 -04/24/ *****8	0 6 3 '01(7.50	:96: 01071: ***	9 009 **87.	- 3 4 50
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Coral Springs, FI 33071 City, State & Zip		SEC	01			
(954) 753-7957 Daytime Telephone number		RETAKT OF LAHASSEE, Y	APR 24 P			
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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

NAME

The name of the corporation shall be:

Kloofpalm, Inc.

<u>ARTICLE II</u> PRINCIPAL OFFICE

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

8805 Tamiami Trail North #169 Naples, Florida 34108

ARTICLE III

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Christine E. Jansen 8805 Tamiami Trail North #169 Naples, Florida 34108

ARTICLE V INCORPORATOR

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

Christine E. Jansen 8805 Tamiami Trail North #169 Naples, Florida 34108

ARTICLE VI OFFICERS

The name and title of the Officers to these Articles of Incorporation are:

Christine E. Jansen President Secretary Director Signature/Incorporator

(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