

TRANSMITTAL LETTER

PO20000050173

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

SUBJECT: KOSTURI ENTERPRISES INC

(Proposed corporate name - must include suffix)

300005431003--9
-05/02/02-01054-017
*****78.75 *****78.75

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

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

LESLIE L. TOTTEN

Name (Printed or typed)

2805 TAMiami TRAIL

Address

Punta Gorda, Fl. 33950

City, State & Zip

941-639-0680

Daytime Telephone Number

FILED
02 MAY - 2 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

5/7/02

2

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
02 MAY -2 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

KOSTURI ENTERPRISES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**4083 MICHEL TREE STREET
PORT CHARLOTTE, FL 33948**

ARTICLE III SHARES

The number of shares of stock is:

1000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

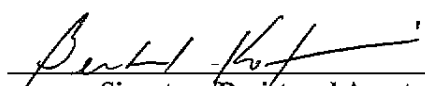
**BERTRAND KOSTURI
4083 MICHEL TREE STREET
PORT CHARLOTTE, FL 33948**

ARTICLE V INCORPORATOR

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

**BERTRAND KOSTURI
4083 MICHEL TREE STREET
PORT CHARLOTTE, FL 33948**

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


Date


Signature/Incorporator


Date