TRANSMITTAL LETTER

P02000072235

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

000006150390--0
-07/02/02--01017--001
*****87.50 *****87.50

SUBJECT: KARIB FINANCIAL SERVICES, INC
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are 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: ODIS WILLIAMS
Name (Printed or typed)

605 N LAKE BLVD, #25
Address

ALTAMONTE SPRINGS, FL 32701
City, State & Zip

407-302-6636 XT 13
Daytime Telephone number

FILED
02 JUL -1 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

7/2

ARTICLES OF INCORPORATION

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

FILED
02 JUL -1 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

KARIB FINANCIAL SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2341 WEKIVA RIDGE ROAD
APOPKA, FL 32712

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INVESTING & NETWORK MARKETING

ARTICLE IV SHARES

The number of shares of stock is:

100,000 COMMON SHARES @ $1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ODIS WILLIAMS, 605 N LAKE BLVD, #25 ALTAMONTE SPRINGS FL 32701
WAYNE ROSS 2341 WEKIVA RIDGE RD APOKA FL 32712

ARTICLE VI REGISTERED AGENT

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

ODIS WILLIAMS
605 N LAKE BLVD, # 25
ALTAMONTE SPRINGS, FL 32701

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

ODIS WILLIAMS
605 N LAKE BLVD, #25
ALTAMONTE SPRINGS, FL 32701

****

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

Odis Williams

Signature/Registered Agent

6-24-02

Date

Odis Williams

Signature/Incorporator

6-2402

Date