P03000048092

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☑ WAIT ☐ MAIN

(Business Entity Name)

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Certified Copies ✓ Certificates of Status ____

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: N. Selective Choices INC.
(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 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:

Kimmie Golden
Name (Printed or typed)

P.O. Box 433
Address

Havana, FL. 32333
City, State & Zip

(850) 545-3721
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

03 MAY -1 AM 9:10

ARTICLE I NAME

The name of the corporation shall be: K. Selective Choices Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Kimmie S. Golden P.O. Box 433 Hallowa, Fl 32333

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Organized to Provide Service to People with Developmental Disability

ARTICLE IV SHARES

The number of shares of stock is: /

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Kimmie S. Golden Directors

ARTICLE VI REGISTERED AGENT

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

Kimmie S. Golden 10 Barber Rd. Hallowa, Fl. 32333

ARTICLE VII INCORPORATOR

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

Kimmie S. Golden 10 Barber Road Hallowa, Fl. 32333

****

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

Kimmie S. Golden
Signature/Registered Agent

4-30-03
Date

Kimmie S. Golden
Signature/Incorporator

4-30-03
Date

5-1-03

I Kimmie Golden will not Record Dissolution Of K. Selective Choice, Inc. I Release the Name to be Irresponsible.

Kimmie Golden

Kimmie GolDen
DRivers Lic # G435-517-67-804-0

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAY -1 AM 9:10

Judy Sadler
MY COMMISSION # DD127124 EXPIRES
January 24, 2006
BONDED THRU TROY FAIN INSURANCE, INC.

Judy Sadler