

P03000092902

(Requestor's Name)

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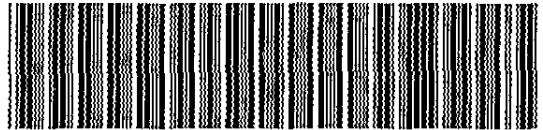
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

203-23160  
TS  
25/02

TRANSMITTAL LETTER

BEST QUICK TAX RETURN  
310 1/2 S. BUMBY AVE  
ORLANDO, FL 32803  
(407) 896-7921

I AM ENCLOSING A CHECK OF \$70 DOLLARS. PLEASE SEND ME A STAMPED COPY OF THE  
ARTICLES.

THANK YOU.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

August 14, 2003

BEST QUICK TAX RETURN  
3101/2 BUMBY AVE  
ORLANDO, FL 32803

SUBJECT: ALBERTO ROBINES  
Ref. Number: W03000023160

We have received your document for ALBERTO ROBINES and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith  
Document Specialist  
New Filings Section

Letter Number: 503A00046381

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TALLAHASSEE, FLORIDA

## **ARTICLES OF INCORPORATION**

The undersigned Incorporators, for distributors under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### **ARTICLE I : NAME**

KAVASA CORPORATION.

### **ARTICLE II : PRINCIPAL OFFICE**

8040 HAMPTON BLVD. #201  
NORTH LAUDERDALE, FL 33068

### **ARTICLE III : SHARES**

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

COMMON STOCK- 100 SHARES NO PAR VALUE

ALBERTO F. ROBINES - 100 SHARES

### **ARTICLE IV : INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

PABLO A. RODRIGUEZ  
310 1/2 S. BUMBY AVE.  
ORLANDO, FL 32803

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TALLAHASSEE, FLORIDA

## **ARTICLE V: INCORPORATORS**

The name and street address of the Incorporator to these Articles of Incorporation is:

PABLO A. RODRIGUEZ, CPA  
310 1/2 S. BUMBY AVE.  
ORLANDO, FL 32803

## **ARTICLE VI : DIRECTORS**

The company will be run by the board of directors. The directors are:

ALBERTO F. ROBINES - PRESIDENT

## **ARTICLE VII : NATURE OF BUSINESS**

The corporation will engage in the business of distributing. The foregoing purposes and activities will be interpreted as examples only and not as limitations, and nothing therein shall be deemed as prohibiting the corporation from engaging in any lawful act or activity permitted in the United States, The State of Florida or any other state , country, territory or nation.

The undersigned Incorporator has executed these Articles of Incorporation this 8th day of August 2003.

  
signature

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Address for:

ALBERTO F. ROBINES  
8040 HAMPTON BLVD #201  
NORTH LAUDERDALE, FL 33068

CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501,  
FLORIDA STATUTES, THE UNDERSIGNED CORPORATION,  
ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA,  
SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING  
THE REGISTERED OFFICE/ REGISTERED AGENT, IN THE  
STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS:

Kavasa Corporation

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND  
OFFICE IS:

Pablo Rodriguez  
310 1/2 S. Bumby Ave  
Orlando, FL 32803

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

  
DATE

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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