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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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#### TRANSMITTAL LETTER

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

CIID TEICE	keiud marketing Services, inc.
SUBJECT:	(Proposed corporate name)
Enclosed is incorporation	an original and one (1) copy of the articles of on and our check for \$
FROM:	Kelud Marketing Services, Inc.
, , , , , , , , , , , , , , , , , , , ,	Name (printed or type)
	16315 NW 48 Avenue
	Address
	Miami Lakes, Fl. 33014
-	City, State & Zip Code
	786-236-2279
· · ·	Telephone number

Note: Please provide the original and one copy of the Articles.

#### ARTICLES OF INCORPORATION

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

#### ARTICLE I NAME

The name of the corporation shall be:

Kelud Marketing Services, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

16315 NW 48 Avenue Miami Lakes, Fl. 33014

#### ARTICLE III SHARES

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

100 Shares @ \$1.00 par value

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

The name and address of the initial registered agent is:

Raquel Vargas 11631 SW 2 Avenue #306 Pembroke Pines, Fl. 33025

### ARTICLE V INCORPORATOR (S)

The name (s) and street address (es) of the incorporator (s) to these Articles of incorporation is (are):

Raquel Vargas P 11631 SW 2 Avenue #306 Pembroke Pines, Fl. 33025

President/Secretary

signed incorporator incorporation this	(s) has (have) executed these  /2 day of SEPT 2023  Signature	Articles -	of
	Signature	:	
	Signature	,	

Signature .

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

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

Kelud Marketing Services, name of the corporation is	Inc.	
16315 NW 48 Avenue Miami Lakes, Fl. 33014 The address of the corporation is		_
The name and address of the registered agent and offi Raquel Vargas Name	SECRETA	G T -
P O Box or Mail Drop Not acceptable)	7 CF SI	R PN L:
Pembroke Pines, Fl. 33025		09
(City / State / Zip)		

Having been named as registered agent and to accept services of process for the above stated corporation at 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.

Gignature)

9/8/03

(Date)

DIVISION OF CORPORATION, P O BOX 6327, TALLAHASSEE, FL. 23214