# P03000124640

(Req	uestor's Name)	<del></del>	
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



600024154656

10/27/03--01068--010 \*\*166.25

O3 OCT 27 AH IO: 21
SECRETARY DE STATE
SALLAHASSE FLURID

# TRANSMITTAL LETTER

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

SUBJECT: LKL	. Enterprise inc.		
	(PROPOSED CORPORA	ATE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00	\$78.75	<b>□</b> \$78.75	<b>2</b> \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
-	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status
		ADDITIONAL CO	DPY REQUIRED
FROM: Li	sa Loper		
	Nam	e (Printed or typed)	
	9 Oaks Drive		
		Address	<del></del>
	Jacksonville Beach, FL. 3	2250	
	City	, State & Zip	
	904-334-7482		
	Daytime	Telephone number	<del></del>

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)

## ARTICLE I NAME

The name of the corporation shall be:

LKL Enterprise Inc.



### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4392 Philips Hwy. Jacksonville FL. 32207

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: For profit Corporation

#### ARTICLE IV SHARES

The number of shares of stock is:
52 Lisa Loper 24 Kenny Loper 24 Lamar Sanford

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Lisa Loper President 9 Oaks Drive Jacksonville Beach, FL. 32250 Kenny Loper Vice President 9 Oaks Drive Jacksonville Beach, FL. 32250 Lamar Sanford Secretary 4392 Philips Hwy. Jacksonville, FL. 32207

#### ARTICLE VI REGISTERED AGENT

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

Lisa Loper 9 Oaks Drive Jacksonville Beach, FL 32250

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lisa Loper 9 Oaks Drive Jacksonville Beach, FL, 32250

**************************************	
Lusa Lope	10/24/03
Signature/Registered Agent	Date
Husa Hope	10/24/03
Signature/Incorporator	Date