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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)	_			
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status	_			
Special Instructions to Filing Officer:	7			
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SECHLIARY OF STATE SECHLIARY OF STATE OF CORPORATIONS

TRANSMITTAL LETTER

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

SUBJECT:LSKKT Services, Inc.				
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	udesuffix)	
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	Plashette Nam			
		33rd Street		
	Coral Springs, Florida 33065 City, State & Zip			
	954-562-1 Daytime			
Filing Fee	Filing Fee & Certificate of Status Plashette Nam 9891 NW Coral Spri Cit	Filing Fee & Certified Copy ADDITIONAL CO Miller (Printed or typed) 33rd Street Address ngs, Florida 33065 y, State & Zip	Filing Fee, Certified Co & Certifica Status	

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)

DIVISION OF CORPORATIONS

04 JAN 15 PM 12: 27

ARTICLE I NAME

The name of the corporation shall be: LSKKT Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

9891 NW 33rd Street Coral Springs, Forida 33065

<u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is: d/b/a LSKKT Services, Inc. in the State of Florida

ARTICLE IV SHARES

The number of shares of stock is: 1000 of Common Stock at a \$1.00 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
Plashette Miller
9891 NW 33rd Street
Coral Springs, Florida 33065

ARTICLE VI REGISTERED AGENT

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

Plashette Miller 9891 NW 33rd Street Coral Springs, Florida 33065

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Signature/Incorporator

Plashette Miller 9891 NW 33rd Street Coral Springs, Florida 33065

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

Signature/Registered Agent

Date