

P040000 45 774

(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:

Connie Kirby gave
AUTHORIZATION BY PHONE TO
CORRECT A4 - IV + V
DATE 3/15/04
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Office Use Only



000028935270

02/25/04--01004--013 **78.75

SECRET
TALLAHASSEE, FLORIDA

04 MAR 15 AM 8:59

FILED

TH 3/15/04

TRANSMITTAL LETTER

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

SUBJECT: Ko Lyn Enterprises, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Carole Lyn Kirby
Name (Printed or typed)

P. O. Box 775
Address

Tarpon Springs, FL 34683
City, State & Zip

727-945-8911
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 5, 2004

CONNIE LYN KIRBY
P O BOX 775
TARPON SPRINGS, FL 34683

SUBJECT: KALYN ENTERPRISES INC.
Ref. Number: W04000009084

We have received your document for KALYN ENTERPRISES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

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) 245-6855.

Tammy Hampton
Document Examiner
New Filings Section

Letter Number: 704A00014941

RECEIVED
04 MAR 15 AM 8:13
TAMMY HAMPTON
NEW FILINGS SECTION
704A00014941

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:

KaLyn Enterprises Inc.

FILED

04 MAR 15 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*2464 Bent Tree Rd
Apt. 2612
Mailing - P.O. Box 775
Tarpon Springs FL 34688 Palm Harbor, FL 34683*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Wedding and Life Celebration Planning

ARTICLE IV SHARES

The number of shares of stock is:

one

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Connie Lyn Kirby - owner
P.O. Box 775 2464 Bent Tree Rd Apt. 2612
Tarpon Springs, FL 34688 Palm Harbor, FL 34683*

ARTICLE VI REGISTERED AGENT

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

*Connie Lyn Kirby
2464 Bent Tree Rd
Apt. 2612
Palm Harbor, FL 34683*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*P.O. Box 775
Tarpon Springs, FL 34688*

*Connie Lyn Kirby
2464 Bent Tree Rd. Apt. 2612
Palm Harbor, FL 34683*

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

Connie Lyn Kirby
Signature/Registered Agent

2/22/2004
Date

Connie Lyn Kirby
Signature/Incorporator

2/22/2004
Date