

704000049807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

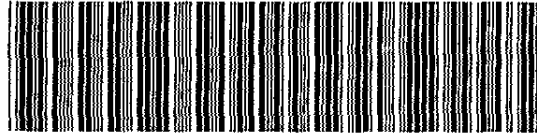
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500030268415

ls

03/19/04--01023--005 **78.75

DIVISION OF CONFIGURATION

RECEIVED
04 MAR 19 AM 10:37

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 MAR 19 AM 8:42

Charter Number Only

VALIDATION ONLY

04 MAR 15 AM 8:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3/18/04

Requestor's Name

Address

City

State

ZIP

Phone

CORPORATION(S) NAME

Kari Enterprises, Inc.

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Foreign | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Reservation | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Certificate Under Seal |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> After 4:30 |
| <input type="checkbox"/> Call If Problem | <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Mail Out |
| <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up | |

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

CERTIFIED COPY


Empire Toll Free: 1-800-432-3028

ARTICLES OF INCORPORATION
OF

A Florida Profit Corporation

(Pursuant to Chapter 607 and/or 621, Florida Statutes)

The undersigned person has signed this document for the purpose of forming a corporation under the laws of Florida and adopts the following Articles of Incorporation.

1. **Name.** The name of this corporation is Kari Enterprises, Inc.
2. **Purpose and Powers.** This corporation is organized for the transaction of any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

This corporation shall have the broad general powers set forth in Chapter 607.0302, Florida Statutes, and the purpose for which this corporation is organized is Kari Enterprises, Inc.

3. **Authorized Shares.** The corporation shall have the authority to issue shares of common stock. The par value of the stock is \$ 1.00 @ 500 shares.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 MAR 19 AM 8:42

4. **Principal Office and Mailing Address of Corporation.** The principal place of business and mailing address of the corporation shall be:

Principal Place of Business:

1300 W. Mc Nab Road
Fort Lauderdale, Florida. 33309

Mailing Address

1300 W. Mc Nab Road
Fort Lauderdale, Florida 33309

5. **Initial Officers/Directors.** The initial Board of Directors shall consist of persons, who shall serve until the first annual meeting of the shareholders, and whose names and addresses are:

Kari Koulouvaris, Director/ President
1300 W. Mc Nab Road
Fort Lauderdale, Florida. 33309

6. **Registered Agent.**

The name and Florida street address of the Registered Agent of the Corporation is:

Kari Koulouvaris,
1300 W. Mc Nab Road
Fort Lauderdale, Florida. 33309

7. **Incorporator.** The name and address of the incorporator is:

Kari Koulouvaris
2005 Agusta Terrace
Coral Springs, Florida. 33071

8. **Effective Date.** These Articles are to be effective the date of filing unless otherwise specified below:

IN WITNESS WHEREOF, the following incorporator has signed these Articles of Incorporation on:

Date: 3/16/04

Kari Koulouvaris

Kari Koulouvaris, Pres

ACCEPTANCE BY REGISTERED AGENT

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.

DATE: 3/16/04

Kari Koulouvaris

Kari Koulouvaris, Pres.

co-3 © LawForms

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 MAR 15 AM 8:42