

PH4000103649

(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



200037959192

04 JUL 13 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

07/13/04--01001--015 **78.75

04 JUL 13 PM 1:31
STATE
DIVISIONS
TALLAHASSEE, FLORIDA

RECEIVED

7507/13/04

TRANSMITTAL LETTER

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

SUBJECT: FKN ENTERPRISES, INC.
(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: IVAN K. CLEMENTS, JR., ESQUIRE
Name (Printed or typed)

632 N. Woodland Blvd., Ste. 3
Address

DeLand, FL 32720
City, State & Zip

(386) 740-0037
Daytime Telephone number

DO NOT MAIL!

Call Karen to Pick Up:

878-9966

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

ARTICLES OF INCORPORATION
OF
FKN ENTERPRISES, INC.

THE UNDERSIGNED INCORPORATOR, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I. CORPORATE NAME.

The name of this corporation is FKN ENTERPRISES, INC.

ARTICLE II. PRINCIPAL OFFICE.

The principal place of business and mailing address of this corporation shall be 4521 U.S. Highway 17, DeLeon Springs, Florida 32130.

ARTICLE III. NATURE OF BUSINESS AND POWERS.

The general nature of the business to be transacted by this Corporation is to engage in any and all business permitted under the laws of the State of Florida.

ARTICLE IV. CAPITAL STOCK.

The number of shares of stock that this corporation is authorized to issue and have outstanding at any one time is 1000 shares of common stock.

ARTICLE V. REGISTERED AGENT AND INITIAL REGISTERED OFFICE.

The Registered Agent and the street address of the initial Registered Office of

FILED
04 JUL 13 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

this Corporation in the State of Florida shall be:

MAHVISH RAUF
4521 U.S. Highway 17
DeLeon Springs, Florida 32130

The Board of Directors from time to time may move the Registered Office to any other address in the State of Florida.

ARTICLE VI. BOARD OF DIRECTORS.

This Corporation shall have one (1) director initially. The number of directors may be increased or diminished from time to time by Bylaws adopted by the stockholders, but shall never be less than one.

ARTICLE VII. INITIAL DIRECTOR.

The name of the initial director of this Corporation and her street address is:

MAHVISH RAUF
4521 U.S. Highway 17
DeLeon Springs, Florida 32130

The person named as initial director shall hold office for the first year of existence of this Corporation or until her successor is elected or appointed and have qualified, whichever occurs first.


ARTICLE VIII. INCORPORATOR.

The name and address of the person signing these Articles of Incorporation as

the Incorporator is:

MAHVISH RAUF
4521 U.S. Highway 17
DeLeon Springs, Florida 32130

IN WITNESS WHEREOF, the undersigned, as Incorporator, has executed the foregoing Articles of Incorporation on the 9th day of July, 2004.


MAHVISH RAUF

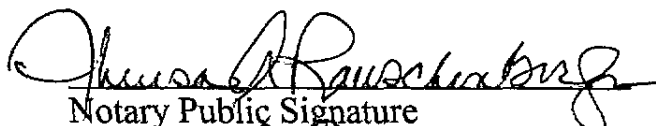

**STATE OF FLORIDA
COUNTY OF VOLUSIA**

BEFORE ME, a Notary Public, personally appeared MAHVISH RAUF, to me known to be the person described as Incorporator and who executed the foregoing Articles of Incorporation, and acknowledged before me that she subscribed to these Articles of Incorporation on the 9th day of July, 2004.



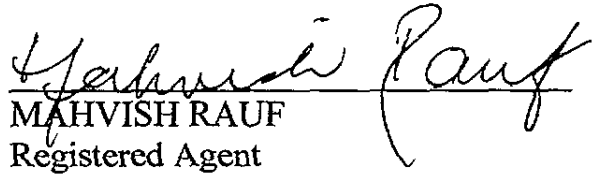
Theresa A. Rauschenberger
MY COMMISSION # CC922228 EXPIRES
July 18, 2004
BONDED THRU TROY FAIN INSURANCE, INC.

(SEAL)


Notary Public Signature

Printed Notary Signature
My Commission Expires: 07-18-04

ACKNOWLEDGMENT OF REGISTERED AGENT OF FKN
ENTERPRISES, INC.

HAVING been named as registered agent and to accept service of process for the above-named corporation at the place designated in the certificate of the Articles of Incorporation, 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.


MAHVISH RAUF
Registered Agent

Dated: July 9th, 2004

FILED
04 JUL 13 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA