

P04000/27566

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

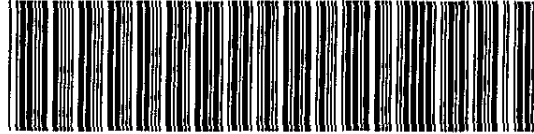
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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49/8

## TRANSMITTAL LETTER

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

SUBJECT: CMK Constuction, 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  
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: Emmanuel Nick Kavouklis  
Name (Printed or typed)

3802 N.E 14th ST  
Address

Gainesville, FL 32609  
City, State & Zip

(352)262-2515  
Daytime Telephone number

**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:

CMK Construction, Inc

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3802 North East 14th Street, Gainesville, FL 32609

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Construction and Remolding of Resendential Homes

### ARTICLE IV SHARES

The number of shares of stock is:

100 shares at .01

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Emmanuel Nick Kavouklis, 3802 N.E 14th St., Gainesville, FL 32609, President

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Emmanuel Nick Kavouklis, 3802 N.E 14th St., Gainesville, FI 32609

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Emmanuel Nick Kavouklis, 3802 N.E 14th St., Gainesville, FI 32609

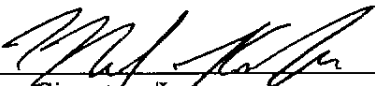
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*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

9/2/04  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

9/2/04  
\_\_\_\_\_  
Date