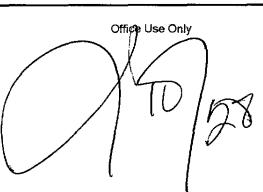
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(Requestor's Name)				
(Address)				
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(Ci	ty/State/Zip/Phone	⊋ #)		
PICK-UP	☐ WAIT	MAIL MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				





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TRANSMITTAL LETTER

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

UBJECT: Kas Ka	O Corp. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
nclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Sus	san S. Kaspar		
		(Printed or typed)	
:	4771 Lakeshore Loop	Addusia	
		Address	
	Oldsmar, FL 34677	, State & Zip	,
	(727) 785-5888 or cell (727) 481	-2649 Felenhone 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:

Kas Kap Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4771 Lakeshore Loop Oldsmar, FL 34677

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

The corporation is organized to engage in any activity or business permitted under the laws of the United States or Florida.

ARTICLE IV SHARES

The number of shares of stock is:

The maximum number of shares that the corporation is authorized to have outstanding any any time is 500 shares of common stock having a par value of \$1,00 per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Susan S. Kaspar, 4771 Lakeshore Loop, Oldsmar, FL 34677: President, Treasurer, Secretary Mark T. Kaspar, 4771 Lakeshore Loop, Oldsmar, FL 34677: Vice President

ARTICLE VI REGISTERED AGENT

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

Susan S. Kaspar 4771 Lakeshore Loop Oldsmar, FL 34677

ARTICLE VII INCORPORATOR

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

Susan S. Kaspar 4771 Lakeshore Loop Oldsmar, FL 34677

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 - Jusan S. Kaspar