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TRANSMITTAL LETTER

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

SUBJECT:	(PROPOSED CORPORAT	TE NAME – <u>MUST INCLU</u>				
\$70.00 Filing Fee	inal and one (1) copy of the artic \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status			
FROM:	24323 TWIN	ETEN Printed or typed) J LAKE DR ddress KES, FL 3	4639	SEGRETARY OF ST	04 NOV -2 PM 2:	FILED

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: FIRE KRB ECO ENTERPRISES, INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 24323 TWIN LAKE DRIVE LAND D'LAKES, FL 34639 ARTICLE III PURPOSE The purpose for which the corporation is organized is: NEW RETAIL BUSINESS FOR AIR & WATER PUZIFICATION EQUIPMENT, HEALTH & NUTRITIONAL PRODUCTS. The number of shares of stock is: 100 Shares INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): KHONDA BETTEN VICE-PRESIDENT 24323 TWIN LAKE DR. KATHRYN REED PRESIDENT 203 LINDA AVE. JEMPLE TERRACE, FL 33617 LAND O'LAKES, FL 34639 REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: The name and address of the Incorporator is: RHONDA BETTEN 24323 TWIN LAKE DR. LANDO'LAKES, FL 34639 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