

PO5000041589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

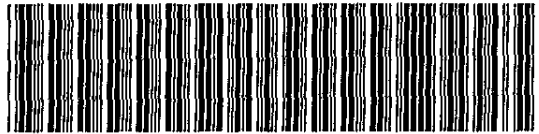
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CL. 3-18

TRANSMITTAL LETTER

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

SUBJECT: Konesens Corporation
(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: Harriet H. Lewis
Name (Printed or typed)

5 Fenwood Lane
Address

Palm Coast, Florida 32137
City, State & Zip

781-405-3634
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:

Konesens Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5 Fenwood Lane; Palm Coast, Florida 32137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide services and consultation to other business, locally, statewide, regionally, nationally, and internationally.

ARTICLE IV SHARES

The number of shares of stock is:

20

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Harriet H. Lewis
5 Fenwood Lane
Palm Coast, Florida 32137
(President)

ARTICLE VI REGISTERED AGENT

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

Harriet H. Lewis
5 Fenwood Lane
Palm Coast, Florida 32137

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Harriet H. Lewis
5 Fenwood Lane
Palm Coast, Florida 32137

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

2/21/05

Date



Signature/Incorporator

2/21/05

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA