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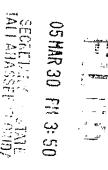
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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TRANSMITTAL LETTER

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

SUBJECT: KTP So	lutions. Inc		
SUBJECT:	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
m 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		.1	l a alagala Com
Enclosed are an orig	inal and one (1) copy of the arti-	cies of incorporation and	a cneck for:
□ \$70.00	\$78.75	□ \$78.75	☑ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
•	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
			Status
		ADDITIONAL COPY REQUIRED	
		L	
FROM: KT	P Solutions, Inc		
110111.	Name	(Printed or typed)	+-/
	9010 SW 137th Ave., Suite 203		
•		Address	
	·		
	Miami, FL 33186		
		State & Zip	
	•		
	305-408-7006		
		elephone 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:

KTP Solutions, Inc.

-05 MAR 30 PM 3: 50

SECRETARY OF STATE TALLAHASSER FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 9010 SW 137th Ave., Suite 203 - Miami, FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Insurance

ARTICLE IV SHARES

The number of shares of stock is:

One Thousand shares of Common Stock @ \$1.00 par value per share (\$1,000.00)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Paul C Herdsman - 7880 SW 196 th Terrace, Miami, FL 33189 (President) & Pauline M Herdsman - 7880 SW 196th Terrace Miami, FL 33189 (Director)

ARTICLE VI REGISTERED AGENT

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

Don Harrison - 1100 SW 128th Terrace, #306 - Pembroke Pines, FL 33027

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Don Harrison - 1100 SW128th Terrace, #306 - Pembroke Pines, FL 33027

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

Date

03/14/2005

03/14/2005

Signature/Incorporator

Date