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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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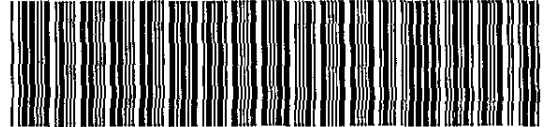
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-15

TRANSMITTAL LETTER

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

SUBJECT: KAT-T-A's Uniform Company
(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: Katherine J Athime
Name (Printed or typed)

3911 Edgewood Ave
Address

Ft Myers Fla 33914
City, State & Zip

239-292-7770
Daytime Telephone number

See mailing address

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:

KATH-T-A's Uniform Company

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 1424
FT Myers FLA 33902

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sale Uniforms

ARTICLE IV SHARES

The number of shares of stock is:

1 Share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Katherine Athime President C.E.O.
~~Trisham~~ David T. Harris V.S. President - Production
Andrea Athime V.S. President Sales
Johnny Stetson Manager (Store)

ARTICLE VI REGISTERED AGENT

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

Katherine Athime
3911 Edgewood Ave. FT Myers FLA 33916

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Katherine Athime
Cannon Pointe 1621 North Tamiami Trail #4
North Ft Myers FLA 33902

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

Katherine Athime
Signature/Registered Agent

3/14/05
Date

K Athime
Signature/Incorporator

3/31/05
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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