

P05.000056745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

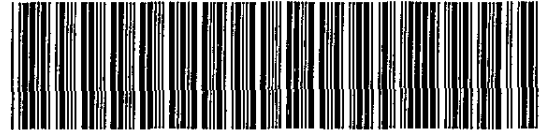
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2005 APR 15 PM 3:54
HALL COUNTY CLERK
HALL COUNTY FLORIDA

4/18/05

TRANSMITTAL LETTER

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

FILED
2005 APR 15 PM 3:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: KRYC, Inc.

(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Yvonne A. Christopher

Name (Printed or typed)

2778 Eventide Drive

Address

Jacksonville, Florida 32209

City, State & Zip

(904) 768-3855

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

FILED
2005 APR 15 PM 3:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

March 1, 2005

YVONNE A. CHRISTOPHER
3778 EVENTIDE DRIVE
JACKSONVILLE, FL 32209

SUBJECT: KRYC, INC.
Ref. Number: W05000010408

We have received your document for KRYC, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the spelling of the registered agent and the incorporators last name.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Document Specialist
New Filings Section

Letter Number: 705A00014143

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:

KRYC, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P. O. Box 12289
Jacksonville, Florida 32209

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
to buy, rent, invest in Real Estate and consult mortgages.

ARTICLE IV SHARES

The number of shares of stock is:
10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Ronnie G. Christopher - 2778 Eventide Drive, Jacksonville, Florida, 32209 - CEO
Yvonne A. Christopher - 2778 Eventide Drive, Jacksonville, Florida, 32209 - CFO
Kim L. Christopher - 10908 Tarin Drive, Jacksonville, Florida, 32208 - Secretary

ARTICLE VI REGISTERED AGENT

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

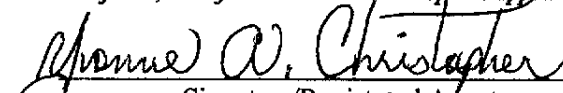
Yvonne A. Christopher
2778 Eventide Drive
Jacksonville, Florida 32209

ARTICLE VII INCORPORATOR

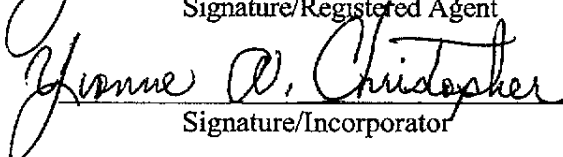
The name and address of the Incorporator is:

Yvonne A. Christopher
2778 Eventide Drive
Jacksonville, Florida 32209

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

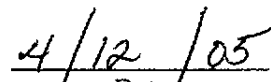


Signature/Registered Agent

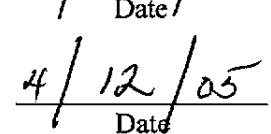


Signature/Incorporator

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



Date



Date