P05000058216

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY CE STATE
TALL AHASSEE ELORIDA

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1405-H299

T. Hampton APR 2 1 2005

TRANSMITTAL LETTER

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

SUBJECT:		RIGINAL, LL	DE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:	
☐ \$70.00 Filing Fee	\$78.75 Filing Fee	□ \$78.75 Filing Fee	\$87.50 Filing Fee,	
2 6	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of	
		ADDITIONAL CO	Status PY REQUIRED	
		1		
FROM:	HANTAL Name	A. LAVENTURE (Printed or typed)		
	02275 H	ALLSTEAD A	JE.	
,	PORT CHARLO	TE FL 3.2	3952	
576) 690-0090 Daytime Telephone number				

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 18, 2005

CHANTAL A LAVENTURE 22275 HALLSTEAD AVE PT CHARLOTE, FL 33952

SUBJECT: KOMPA ORIGINAL, LLC

Ref. Number: W05000014278

RECEIVED

05 APR 20 PM IZ: 45

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

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock.

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) 245-6855.

Tammy Hampton Document Specialist New Filings Section

Letter Number: 205A00018868

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
	05 APR 20 AH 7: 27
ARTICLE I NAME The name of the corporation shall be:	
KOMPA ORIGINAL, INC	SECRETARY OF STATE TALLAHASSEE FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
22275 HALLSTEAD AVE	
PORT CHARLOTTE, FL 33952	•
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
PROFIT	
ADDIOLD III GUADDO	
ARTICLE IV SHARES The number of shares of stock is:	· · · · · · ·
1 (will raise as Company grows)	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR	28
List name(s), address(es) and specific title(s):	· · · · · · · · · · · · · · · · · · ·
CHANTAL A. LAVENTURE CEO	
22275 HALLSTEAD AVE	
PORT CHARLOTTE, FL 33952	······································
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of	f the registered agent is:
CHANTAL A LAVENTURE	
22275 HALLSTEAD AVE	· ·
PORT CHARLOTTE, FL 33952 ARTICLE VII INCORPORATOR	en e
The name and address of the Incorporator is:	and the second s
CHANTAL A. LAVENTURE	
22275 HALLSTEAD AVE	<u> </u>
PORT CHAPPLOTTE, FL 33952	· · · · · · · · · · · · · · · · · · ·
**************************************	**************************************
certificate, I am familiar with and accept the appointment as registered agent and a	agree to act in this capacity
Post f	H 19-15
Signature/Registered Agent	4-18-05 Date
Digital of Light Control of Light	Date
Thanky Daventinos	4-18-05
Signature/Incorporator	Date