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(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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07/05/05--01018--009 **78.75

CB7-14 WOS-32466

TRANSMITTAL LETTER

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

SUBJECT: John	Kalicak Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDESUFFIX)	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$70.00	\$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy	
	& Certificate of Status	& Ceruneu Copy	& Certificate of	
			Status	
	ADDITIONAL COPY REQUIRED			
FROM: John Kalicak Name (Printed or typed)				
429 E. Orange St.				
Address				
Altamonte Springs, FL. 32701				
City, State & Zip				
3:	21-303-5976			
Daytime Telephone number				

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 6, 2005

JOHN KALICAK 429 E ORANGE ST ALTAMONTE SPRINGS, FL 32701

SUBJECT: JOHN KALICAK INC. Ref. Number: W05000032466

We have received your document for JOHN KALICAK INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles must be completed in order to file the document.,

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) 245-6925.

Letter Number: 705A00044857

Cynthia Blalock Document Specialist New Filings Section

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED 05 JUL 13 AM 8: 18
ARTICLE I NAME The name of the corporation shall be: JOHN KALICAK INC.	SECTIONAL OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	ALTAMONTE SPRINGS, FL 32701
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
TECHNOLOGY CONSULTATION ARTICLE IV SHARES The number of shares of stock is:	4 DESIGN SYSTEMS
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR List name(s), address(es) and specific title(s): JOHN KALICAK PRESIDENT	
YZ9 E-ORANGE ST- ALTAMONTE ARTICLE VI REGISTERED AGENT	SPRINGS, FL 32701
The name and Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
JOHN KALI CAK 429 E ORANGE ST. ALTAMONT	TE SPANGS, FL 32701
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
JOHN KALICAK 429 E. ORANGEST	
ALTAMONTE SPRINGS FL 3270))
**************************************	************************************ ve stated corporation at the place designated in this
- ()/k_L-()	7/11/05
Signature/Registered Agent	Date 7/2/05
Signature/Incorporator	Pate