

PD5000104062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

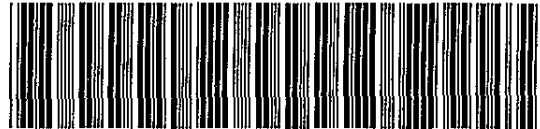
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/15/05--01045--003 **78.50

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 JUL 21 PM 4:14

MRD
7/26

105-34031

TRANSMITTAL LETTER

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

SUBJECT: _____

KAKEVI

(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: _____

KEITH ALLEN

Name (Printed or typed)

100-20 AVE. SO.

Address

ST. PETE, FLA 33705

City, State & Zip

222-822-8139

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 15, 2005

KEITH ALLEN
100 20 AVE S
ST PETERSBURG, FL 33705

SUBJECT: KKEYI INC
Ref. Number: W05000034031

We have received your document for KKEYI INC and your check(s) totaling \$78.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

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) 245-6879.

Ruby Dunlap
Regulatory Specialist
New Filings Section

Letter Number: 905A00046807

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

KAKEY, INC. 05 JUL 21 PM 4:14

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

100-20 AVE. SO.
ST. PETE. FLA. 33705

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PRODUCE AND
SALE AQUATIC EQUIPMENT.

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

KEITH ALLEN : DIRECTOR
100-20 AVE. SO.
ST. PETE. FLA
33705

ARTICLE VI REGISTERED AGENT

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

KEITH ALLEN
100-20 AVE. SO.
ST. PETE. FLA. 33705

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KEITH ALLEN
100-20 AVE. SO.
ST. PETE. FLA. 33705

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

KEITH ALLEN

Date

7/21/05

Signature/Incorporator

Date

7/21/05