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TRANSMITTAL LETTER

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

SUBJECT: KEVELLE, INC. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)			
Enclosed are an orig	ginal and one (1) copy of the artic		a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
	JANELLE HIN Name of		
	PALM HARBOR City,	, FLORIDA State & Zip	

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)	
·	FILED
The name of the corporation shall be: KEVELLE, IN	C. 05 AUG 29 PM 2: 56
Tovolco, Tivo	_ '
	SECRETARY OF STATE TALLAHASSEF, FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
2600 US. HWY 19	
HOLIDAY, FLORIDA 34691 ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
FOR PROTECTION OF BUSINESS AN	ID PROTECTION PERSONALLY.
ARTICLE IV SHARES	
The number of shares of stock is: 2	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR List name(s), address(es) and specific title(s): KEVIN L. HINES - PRESIDENT JANELLE HINES - VICE PRESIDEN	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable)	
JANELLE HINES 2644 SADDLEWOOD LANE, PALM HARE	30R. FLA, 34685
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
JANELLE HINES	
2644 SADDLEWOOD LANE, PALM HA	RBOR, FLA. 34685
• •	************
Having been named as registered agent to accept service of process for the abovertificate, I am familiar with and accept the appointment as registered agent an	
f 1 //	_
Aire le Hines	LingusT 23, 2000
Signature/Registered Agent	// Date
Inelle Lines	august 25, 2005 Quegust 25, 2005
Signature/Incorporator	Date