

P05000166180

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C.S. 12

## COVER LETTER

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

SUBJECT: Phillips Karate Academy, 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  
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: Kiok Phillips

Name (Printed or typed)

8717-3 Little Road

Address

New Port Richey, FL 34654

City, State & Zip

(727) 848-8108

Daytime Telephone number

**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)

### ARTICLE I NAME

The name of the corporation shall be:

Phillips Karate Academy, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8717-3 Little Road, New Port Richey, FL 34654

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation shall engage in any activity or business permitted under the laws of the United States and of the State of Florida.

### ARTICLE IV SHARES

The number of shares of stock is:

One thousand

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Kiok Phillips - President  
8717-3 Little Road  
New Port Richey, FL 34654

### ARTICLE VI REGISTERED AGENT

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

Kiok Phillips - President  
8717-3 Little Road  
New Port Richey, FL 34654

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kiok Phillips - President  
8717-3 Little Road  
New Port Richey, FL 34654

\*\*\*\*\*  
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

Kiok Phillips  
Signature/Registered Agent

12-19-05  
Date

Kiok Phillips  
Signature/Incorporator

12-19-05  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA