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Office Use Only

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

# TRANSMITTAL LETTER

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

SUBJECT: KOOl - AIR Control Inc.
(Proposed corporate/name - must include suffix)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM:

Name (Printed or Apped)

- 0-0 V

Address

33012

205-822-06

Daytime Telephone number

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

# ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME.
The name of the corporation shall be:

# KOOL-AIR CONTROL, INC.

## PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

4655 PALM AVE APT 232 HIALEAH, FL 33012

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000 Common Shares

# INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

PEDRO ESPINOLA

4655 PALM AVE APT #232 HIALEAH, FL 33012

### INCORPORATOR / OFFICERS

The name and address of the incorporator to these Articles of Incorporation are:

PRESIDENT:

PEDRO ESPINOLA

4655 PALM AVE APT #232 HIALEAH, FL 33012

Signature/Inc forator

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Reg ered Agent