

PO6000019735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

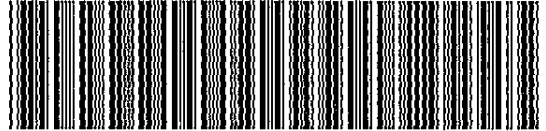
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 FEB -7 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2-10-06
B

COVER LETTER

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

SUBJECT: KING OF the RING. CO
(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: KING OF the RING. CO
Name (Printed or typed)

450 E 30th Apt 5
Address

HiALEAH, FL 33013
City, State & Zip

(305) 519-5989
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:

King of the Ring. Co

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*450 E 30st Apts
Hialeah, FL 33013*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

WELDING AND special WELDING MACHINE

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*JESUS DE LA CARIDAD RAMOS President
KENIA ALVAREZ ~~in~~ President*

ARTICLE VI REGISTERED AGENT

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

*JESUS DE LA CARIDAD RAMOS
450 E. 30st Apt 5
Hialeah, FL 33013*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*JESUS DE LA CARIDAD RAMOS
450 E 30st Apts
Hialeah, FL 33013*

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



Signature/Incorporator

01/31/06.

Date

01/31/06

Date

FILED
06 FEB -7 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA