

P06000024933

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

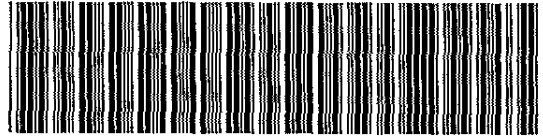
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100066014611

02/16/06 --01011--012 *\$78.75

FILED
06 FEB 16 PM 1:46
CLERK OF THE STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: KAVIN'S CUSTOM CABINETRY 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: KAVIN BROWN
Name (Printed or typed)

10603 N.W. 53 STREET
Address

SUNBISH FL 33351
City, State & Zip

954-815-2719
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:

KANIN'S CUSTOM CABINETRY INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

10603 N.W. 53 STREET
SUNRISE, FL. 33351

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CABINETRY

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

KAVIN BROWN - PRESIDENT
10603 N.W. 53 STREET
SUNRISE, FL. 33351

ARTICLE VI REGISTERED AGENT

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

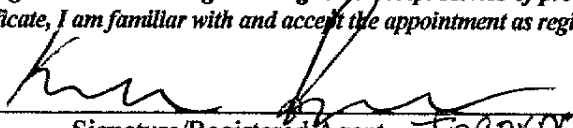
KAVIN BROWN
10603 N.W. 53 STREET
SUNRISE, FL. 33351

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KAVIN BROWN
10603 N.W. 53 STREET
SUNRISE, FL. 33351

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, Incorporator

2/1/2006
Date

Signature/Incorporator

Date

06 FEB 16 PM 1:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED