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## THE KRAMERS 407 NE 7<sup>TH</sup> STREET GAINESVILLE, FL. 32605

DATE 2/9/06

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

Re: KRAMER ENTERPRISES, Inc. (Name of Corporation)
•
Gentlemen:
Enclosed please find the original and one copy of the Articles of Incorporation, together with my
check in the amount of \$78.75
This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for incorporation and Fee
Very truly yours.
0.54
Sandra S. Kramer
(Individual's Name)
KRAMER ENTERPRISES, INC. (Name of Corporation)
MAILING ADDRESS OF CORPORATION

PHONE

•	ARTICLES OF	INCORPO	RATION		
Fa	nily	of of	70111011		
Fa KRAMER	ENTER (name of	PRISE f corporation	5 , INC.		<u>.</u>
The undersigned acting as the incorporation for the following articles of incorporation for	porators of a corpora	ation under th	e Florida Business	Corporation	Act, adopt(s)
The name of the corporation is:	ARTICLE I - C ENTERPR	CORPORATE	NAME INC:		
This corporation shall exist perpetua	ARTICLE	II - DURATIO	ON .	TALLAHASSEE, FLO	SEB 24 AM IO:
The corporation is organized for the United States and the State of Florida.		III - PURPO	_	rmitterunde	erfile laws of th
	ARTICLE IV	- CAPITAL S	тоск		
The corporation is authorized to issu	ue <u>5 00</u> share	es of common	stock, par value \$	1.00	per share
The street address of the initial prin	ARTICLE V - INIT				
STREET ADDRESS 407	NE_	7 [4	Street		
GAINESVILLE					
CITY		FLORI	DA	ZIP	32601
Mailing address, if different					
STREET ADDRESS		<u>-</u>			

## ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

FLORIDA

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	SANDA	A KI	RAMER			
ADDRESS	407	NE	フザ	Street		
CITY	CAIN	esuil	le_	FLORIDA	ZIP	3260/

ZIP

CITY

, <b></b>	· "		\	I I N COM O D C		
d "		VII - INITIAL BC				
	rporation shall have	by the By-Laws, I	) directo but shall nev	rs initially. The mer be less than on	umber of due (1). The	irectors may be names and
addresses of	the initial director(s) of the corpora	tion are as follows	:			
NAME	SANDRA S.	KRA	MER	<del></del>		
ADDRESS			_	street		
CITY	GAINES VILLE		STATE	FI	ZIP	32601
NAME	Stephen F	? K	RAMEN	 2		
ADDRESS	1321 NW					
CITY	GAINESVILLE		STATE	FI	ZIP	32605
NAME		·			<u> </u>	
ADDRESS						
CITY			STATE		ZIP	
	AR	TICLE VIII - INC	ORPORAT	ORS		
The names a	nd addresses of the incorporators si	gning these Article	s of Incorpo	ration are as follo	ws:	
NAME	SANDRA S.	KRAMS	· R			
ADDRESS	407 NE		Stree	+		
CITY	GAINESville		STATE	F)	ZIP	32601
NAME	Stephen R		MER			
ADDRESS	1321 NO			e		
CITY	GAINESUILLE		STATE	F/	ZIP	32605
NAME						
ADDRESS						
CITY			STATE		ZIP	
The undersi	gned incorporator(s) have execu	ted these Articles	of Incorpo	ration this	97#	
day of	February	بلہ مب	2006		•	
	J					
			ondes	5 Kgs	mer (	Signature)
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			-ym-	· 10 cm	<del></del> (	oignature)

(Signature)

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

Family
FAMILY  KRAMER / ENTERPRISES, INC.  (name of corporation)
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, organized under the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation at 407 NS 7 TH Street
GAINES VILLE, FI 32601
has named SANDRA S. KRAMER
located at the aforesaid address, as its registered agent to accept service of process within this
state.
06 FEB 24 AMI SECRETARIASSEE, FLO
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 regis-
tered 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.