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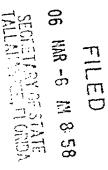
| (Requestor's Name) | | | | |
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| (Address) | | | | |
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| (Cit | y/State/Zip/Phone | e#) | | |
| PICK-UP | ☐ WAIT | MAIL. | | |
| (Bu | siness Entity Nar | ne) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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ORIGONAL

COVER LETTER

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

| SUBJECT: | Complete Kitchen Care, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) | | | |
|----------------------|---|--|--|--|
| Enclosed are an orig | inal and one (1) copy of the artic | | | |
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status | |
| FROM: | Michael William Cathcart Name (Printed or typed) | | | |
| | 10450 SW 198th Street | | | |
| | | Address | | |
| | | | | |
| | City, State & Zip | | | |
| | (305)-7 | 49-5208 | | |
| | Daytime T | elenhone nimber | | |

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:

Complete Kitchen Care, Inc.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

10450 SW 198th Street Miami, FL. 33157

ARTICLE III _ PURPOSE

The purpose for which the corporation is organized is:

commercial kitchen appliance repairs

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):

Michael William Cathcart 10450 SW 198th Street Miami, FL. 33157 Officer and Director

ARTICLE VI REGISTERED AGENT

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

Michael William Cathcart 10450 SW 198th Street Miami, FL. 33157

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael William Cathcart 10450 SW 198th Street Miami, FL. 33157

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 Michael w Cothcot 03/03/2006

Michael Washer 03/03/2006

Signature/Incorporator Date

March 3, 2006

Article:

(Effective Date) 04/01/2006

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Complete Kitchen Care, Inc.

Michael William Cathcart 10450 SW 198th Street Miami, FL. 33157