

PO6000055855

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

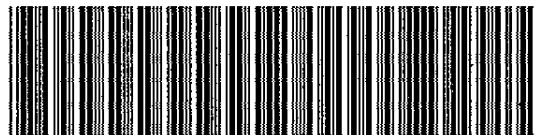
(Business Entity Name)

(Document Number)

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2006 APR 19 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Hampton APR 19 2006

COVER LETTER

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

SUBJECT: K+S Mortgage Consulting, 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: Kristy Warona
Name (Printed or typed)

14104 Yellowwood Cir
Address

Orlando FL 32828
City, State & Zip

407.447.1979
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:

K + J Mortgage Consulting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

14104 Yellow Wood Cir
Orlando, FL 32828

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Mortgage Consulting

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):

Kristy Norona
CEO
14104 Yellow Wood Circle
Orlando, FL 32828

ARTICLE VI REGISTERED AGENT

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

Kristy Norona
14104 Yellow Wood Cir
Orlando, FL 32828

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kristy Norona
14104 Yellow Wood Circle
Orlando, FL 32828

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

4/17/06

Date

4/17/06

Date

2006 APR 19 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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