

P060000061844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

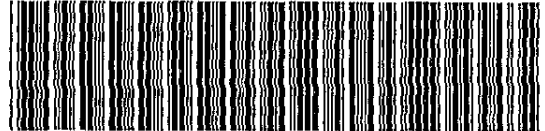
(Document Number)

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Keith Martin GAVE
AUTHORIZATION BY PHONE TO
CORRECT Name
DATE 5/2/06
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04/17/06--01027--010 **70.00

FILED

2006 MAY -2 PM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Hampton MAY - 2 2006

TRANSMITTAL LETTER

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

SUBJECT: KAM ENTERPRISES, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Keith Martin
Name (Printed or typed)

4318 MESA DRIVE
Address

New Port Richey, FL 34653
City, State & Zip

727-844-5721
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

06 MAY -2 PM 1:33

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

April 18, 2006

KEITH MARTIN
4318 MESA DR
NEW PT RICHEY, FL 34653

SUBJECT: KAM ENTERPRISES, INC.
Ref. Number: W06000018218

We have received your document for KAM ENTERPRISES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L04000064904 (KAM ENTERPRISE L.L.C.).

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Document Specialist
New Filing Section

Letter Number: 706A00026274

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

KEITH MARTIN INC.

2006 MAY -2 PM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4318 MESA DRIVE
NEW PORT RICHEY, FL 34653

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BETTER CONTROL ASSESTS, LIABILITIES, WORKERS PAY, AND CONTROL MY BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

KEITH MARTIN - PRESIDENT
4318 MESA DR - NEW PORT RICHEY, FL 34653

ARTICLE VI REGISTERED AGENT

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

KEITH MARTIN
4318 MESA DR - NEW PORT RICHEY, FL 34653

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KEITH MARTIN
4318 MESA DR - NEW PORT RICHEY, FL 34653

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

4-21-06

Date

4-21-06

Date