

POL0000066836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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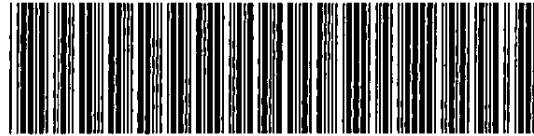
(Business Entity Name)

(Document Number)

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2006 MAY 11 PM 2:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: MDKAL REFINISHING 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: MICHAEL D. KALOUS

Name (Printed or typed)

4027 39 TH AVE. N.

Address

ST. PETERSBURG, FL. 33714

City, State & Zip

727 772-3377

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)

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2006 MAY 11 PM 2:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

MDKAL REFINISHING INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4027 39TH AVE N.
ST PETERSBURG, FL 33714

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFESSIONAL CORPORATION

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MICHAEL D. KALOUS - PRESIDENT
MICHAEL D. KALOUS - V. P.
HOLLY J. KALOUS - SECRETARY
LORI ABBOTT - DIRECTOR

ARTICLE VI REGISTERED AGENT

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

MICHAEL D. KALOUS
4027 39TH AVE N.
ST. PETERSBURG FL. 33714

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL D. KALOUS
4027 39TH AVE N.
ST. PETERSBURG FL. 33714

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

6 May 06

Date

6 May 06

Date