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PICK-UP	WAIT MAIL	
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TALLAHASSEE

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TRANSMITTAL LETTER

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

SUBJECT:	K Ayers, Inc	<u>.</u>		
	(Proposed	corporate name - must include suffix)	•	
Enclosed is an original and one	(1) copy of the articles of	fincorporation and a check fo	or:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate	\$78.75 Filling Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate	
	ADDITIONAL COPY REQUIRED			
FROM:	Douglas L. Comet Name (Printed or Typed)			
30222 Emmetts Ct.				
	Wesley Chapel, FL 33543 City, State & Zip			
(813) 503-7085				

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

K Ayers, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

30222 Emmetts Ct Wesley Chapel, £L335433

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Kathryn Ayers

Kathryn Ayers 30222 Emmetts Ct.

Wesley Chapel, FL 33543

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:v

Kathryn Ayers 30222 Emmetts Ct. Wesley Chapel, FL 33543

Signature/Incorporator

Date

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 registered 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.

Signature/Registered Agent

Date