

P6000090227

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

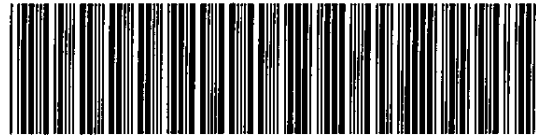
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Kings County Property, 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: Kings County Property, Inc.
Name (Printed or typed)

P.O. Box 0672
Address

Miami, Florida 33168
City, State & Zip

786-285-6949
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:

Kings County Property, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

645 North East 166 Street Miami, FI 33162

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to manage property

ARTICLE IV SHARES

The number of shares of stock is:

800

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Luke Strachan 645 NE 166 St. #3 Miami, FI. 33162
Yola Strachan 19710 North East 12 Avenue Miami, FI 33179 Vice-President
Jacqueline Strachan 19710 North 12 Avenue Miami, FI 33179 Secretary

ARTICLE VI REGISTERED AGENT

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

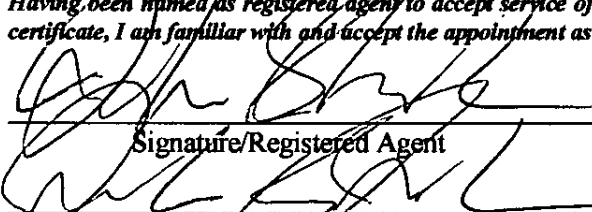
Jacqueline Strachan 19710 North 12 Avenue Miami, FI 33179

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Luke Strachan 645 North East 166 Street # 3 Miami, FI 33162
Yola Strachan 19710 North East 12 Avenue Miami, FI 33179
Jacqueline Strachan 19710 North 12 Avenue Miami, FI 33179

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

June 27, 2006

Date



Signature/Incorporator

June 27, 2006

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA