## P06000/43485

(Reques	stor's Name)			
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PICK-UP	WAIT MAIL			
(Busine:	ss Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

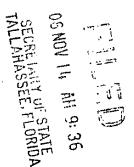
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Sherry ME.

## **COVER LETTER**

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

SUBJECT: KATMAT INC				
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	THOMAS SCHU	BERT (Printed or typed)		
	8905 S. W.	o. 62nd Phr	ICE	
	GAINES VILLE	FL 37	608	
	709 - 612 - Daytime To	0878		

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



October 12, 2006

THOMAS SCHUBERT 8905 S.W. 62ND PLACE GAINESVILLE, FL 32608

SUBJECT: KATMAT, INC. Ref. Number: W06000044878

We have received your document for KATMAT, 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 existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

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) 245-6879.

Letter Number: 806A00060909

Ruby Dunlap Regulatory Specialist New Filing Section

•	OF INCORPORATION ith Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I	NAME	
	cornoration shall be:	
	VATMAT	TOSCH,1
	KATMAT, INC. NATITION	1000117
ARTICLE II	PRINCIPAL OFFICE	OF MON IN AM 9: 36
The principal pla	ce of business/mailing address is: 8905 5.40. 62nd Pl.	西西
	8405 8.00. Wind FI.	是然 三 "
	Gaines ville, FL 32608	FOR F
ARTICLE III	PURPOSE	景 星
	which the corporation is organized is:	75 9
7	o invest in for profit ventures.	निस् अ
,	o process process con constraints	gr.
ARTICLE IV	SHARES	~
The number of sl	sorge of stock is:	
	iales of stock is. [900]	
4000000	INTERNAL ORBITORING AND/OR DIDECTORS	
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS  dress(es) and specific title(s):	
LIST Hame(S), ad		
	Thomas A. Schubert PDTS 8905 S.W. Grad Pl.	
	8905 S.W. 62nd Pl.	
	Gainesville, FZ 32608	
	5 2608	
ARTICLE VI	REGISTERED AGENT	
The name and F	lorida street address (P.O. Box NOT acceptable) of the registered ag	gent is:
	Katie Schubert	
	8905 SW. 62nd Pl.	
	Garinesulle Fr	
ARTICLE VII	Katie Schubert 8905 Sw. 62nd Pl. Gaines ville, FC INCORPORATOR 32608	
<del></del>	ddweee of the Incornorator is:	
	Thomas A. Schubert 8905 S.W. Grad Pl. Gaines ville IFL 32608	
	2905 Sin 102 d P/	
	0103 010. 500	
*****	Gaines ville ITL 32608	******
Having been named	as registered agent to accept service of process for the above stated corporation	at the place designated in i
	illar with and accept the appointment as registered agent and agree to act in this c	
1/		-10-D1-
	<u> </u>	Data Up
7 Signat	ure/Registered Agent	Date
- LADWA	alla litt	Date 0 - 6 - 0 6
Signa	hire/Incorporator	Date
TA	OMAS A. SCHUBERT	
, ,	ererre en la fille de la companya d	