(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone#	)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
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Certified Copies	_ Certificates of	Status
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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# **COVER L'ETTER**

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

SUBJECT: S.J.K. Enterpri	ses Inc.	ONE STANSON MATERIAL VALUE	TIME OTTERNA
(PRO	POSED CORPORA	TE NAME – <u>MUST INCL</u>	ODE SUFFIX)
Enclosed are an original and one	(1) copy of the art	icles of incorporation and	l a check for:
\$70.00 \$78.75 Filing Fee & Certific		\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM: Stefan Kriegs	man		
	Name	(Printed or typed)	<del></del>
1355 Crom	ney Rd. N.E.	Address	
Palm Bay,		, State & Zip	
321-288-36	331	Telephone number	

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





### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 26, 2007

STEFAN KRIEGSMAN 1355 CROMEY RD., NE PALM BAY, FL 32905

SUBJECT: S.J.K. ENTERPRISES INC.

Ref. Number: W07000036092

We have received your document for S.J.K. ENTERPRISES INC. and your check(s) totaling \$78.75. 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 corrected 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) 245-6047.

Carolyn Lewis
Document Specialist
New Filing Section

Letter Number: 807A00046711

## **COVER LETTER**

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

SUBJECT: KriegCorp Enterprises Inc. (PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the arti-	cles of incorporation and	la check for:
S70.00 S78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: Stefan Kriegsman		
Name	(Printed or typed)	***
1355 Cromey Rd. N.E.		
	Address	
Palm Bay, Fl. 32905	State & Zip	
321-288-3631		
Daytime T	elenhone 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:

KriegCorp Enterprises Inc.

# FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3830 S. Hwy. A1A Melbourne Beach, Fl. 32951 Unit C-6

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail Sales

#### ARTICLE IV SHARES

The number of shares of stock is:

100

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Stefan Kriegsman 1355 Cromey Rd. N.E. Palm Bay, Fl. 32905

#### ARTICLE VI REGISTERED AGENT

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

Stefan Kriegsman 1355 Cromey Rd. N.E. Palm Bay, Fl. 32905

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Stefan Kriegsman 1355 Cromey Rd. N.E. Palm Bay, Fl. 32905

**************************************	**************************************
Siden Kreshu	
Signature/Registered Agent	Date
Signature/Incorporator	Date