

PO7000102424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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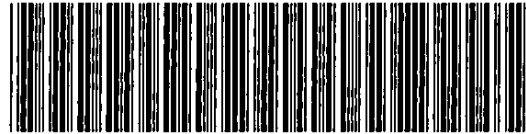
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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07 SEP 13 PM 3:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VH

LA7-3327

## COVER LETTER

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

SUBJECT: Prestige Processing Services, 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: Krysten Lynch

Name (Printed or typed)

457 NE 136 Street #1

Address

North Miami, FL 33161

City, State & Zip

305-895-6632

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 12, 2007

KRYSTEN LYNCH  
457 NE 136 STREET #1  
NORTH MIAMI, FL 33161

SUBJECT: PRESTIGE PROCESSING SERVICES, INC.  
Ref. Number: W07000033259

We have received your document for PRESTIGE PROCESSING SERVICES, INC. and your check(s) totaling \$70.87. 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

**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) 245-6962.

Valerie Herring  
Document Specialist  
New Filing Section

Letter Number: 807A00044441

# 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:

KryssKross, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

457 NE 136 Street  
North Miami, FL 33161

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The undersigned incorporator, for the purpose of performing a corporation, under the Florida Business Corporation Act, Chapter 607 of the Florida Statute, hereby adopts the following Articles of Incorporation

## 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):

Krysten Lynch  
457 NE 136 Street  
North Miami, FL 33161

## ARTICLE VI REGISTERED AGENT

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

Krysten Lynch  
457 NE 136 Street  
North Miami, FL 33161


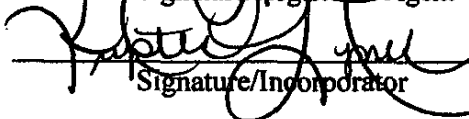
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Krysten Lynch  
457 NE 136 Street  
North Miami, FL 33161

\*\*\*\*\*

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

9/11/07  
\_\_\_\_\_  
Date  
9/11/07  
\_\_\_\_\_  
Date

FILED

07 SEP 13 PM 3:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA