

PO7000/13772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

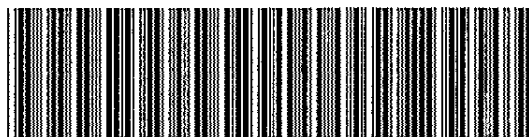
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KS

10/16/07

COVER LETTER

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

SUBJECT: PKU 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: Kathryn Sutherin

Name (Printed or typed)

17119 Magnolia Island Blvd

Address

Clermont, FL, 34711

City, State & Zip

407-905-9485

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

PKU Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

17119 Magnolia Island Blvd

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Daycare

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):

Kathryn Sutherin President, Vice President,

Secretary, treasurer

17119 Magnolia Island Blvd

Clermont, Fl, 34711

ARTICLE VI REGISTERED AGENT

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

Kathryn Sutherin
17119 Magnolia Island Blvd
Clermont, Florida, 34711

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kathryn Sutherin
17119 Magnolia Island Blvd
Clermont, Florida, 34711

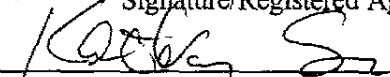
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

10/10/07

Date



Signature/Incorporator

10/10/07

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA