

P08000046367

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

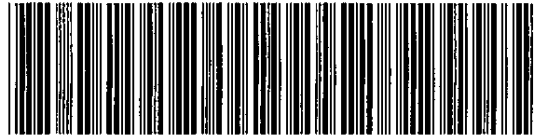
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/23/08--01021--023 **78.75

FILED
08 MAY - 8 PM 1:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/18/08 76655

COVER LETTER

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

SUBJECT: LAK 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: KIMBERLY N. SANCHEZ
Name (Printed or typed)

223 TREASURE HARBOR DRIVE
Address

ISLAMORADA, FL 33036
City, State & Zip

305-852-0258
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 2, 2008

KIMBERLY N. SANCHEZ
223 TREASURE HARBOR DRIVE
ISLAMORADA, FL 33036

SUBJECT: KAL CORPORATION
Ref. Number: W08000022321

We have received your document for KAL CORPORATION 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) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 008A00027951

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:

LAK SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

223 TREASURE HARBOR DRIVE
ISLAMORADA, FL 33036

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
PROFESSIONAL CORPORATION

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):

KIMBERLY N. SANCHEZ PRES/TREASURER
223 TREASURE HARBOR DRIVE ISLAMORADA, FL 33036

LAZARO SANCHEZ VICE PRES/SECRETARY
223 TREASURE HARBOR DRIVE ISLAMORADA, FL 33036

ARTICLE VI REGISTERED AGENT

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

KIMBERLY N. SANCHEZ
223 TREASURE HARBOR DRIVE
ISLAMORADA, FL 33036

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KIMBERLY N. SANCHEZ
223 TREASURE HARBOR DRIVE
ISLAMORADA, FL 33036

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

5/05/08

Date

5/05/08

Date

FILED
08 MAY -8 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA