

PO8000672657

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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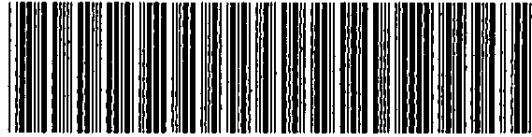
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2008 AUG -4 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers AUG 04 2008

COVER LETTER

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

SUBJECT: Keystone Asset Recovery & Management, 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: Cynthia Gilreath

Name (Printed or typed)

6005 Stirling Road #183

Address

Davie, FL 33314

City, State & Zip

954-253-8301

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Keystone Asset Recovery & Management, Inc.

ARTICLE II PRINCIPAL OFFICE

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

6005 Stirling Rd #183
Davie, FL 33314

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Asset Management and consulting

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):

James Graham Director
6005 Stirling Rd #183
Davie, FL 33314

Cynthia Gilreath Director
6005 Stirling Rd #183
Davie, FL 33314

ARTICLE VI REGISTERED AGENT

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

Cynthia Gilreath
6005 Stirling Rd #183
Davie, FL 33314

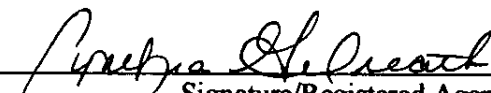
ARTICLE VII INCORPORATOR

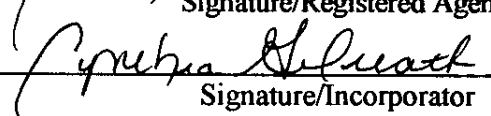
The name and address of the Incorporator is:

Cynthia Gilreath
6005 Stirling Rd #183
Davie, FL 33314

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TALLAHASSEE, FLORIDA

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

7/31/08
Date
7/31/08
Date