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## TRANSMITTAL LETTER

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

2008 NOV 19 AM 11: 39

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

SUBJECT: _KLEER1, INC.		
(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)  Enclosed are an original and one (1) copy of the articles of incorporation and a check for:		
FROM: IIM SFAKIANO	OS	
Ŋ	Name (Printed or typed)	
362 GULF BRE	EZE PKWY. STE. 101	
	Address	
GULF BREEZE	, FL 32561	
	City, State & Zip	
850-449-9300		
D	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)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Article I Name

The name of the corporation shall be: KLEER1, INC.

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Article II **Principal Office** 

The principal place of business/mailing address is: 362 GULF BREEZE PKWY. STE 101 GULF BREEZE, FL 32561

Article III Purpose

The purpose for which the corporation is organized is: TO RUN A FOR PROFIT BUSINESS DEALING WITH ANY LEGAL BUSINESS PURPOSE WITH THE PRIMARY PURPOSE BEING SALES AND CONSULTING

Article IV Shares . 1,000 SHARES ARE AUTHORIZED

Initial Officers and/or Directors

JIM SFAKIANOS - PRESIDENT 362 GULF BREEZE PKWY, STE 101 GULF BREEZE, FL 32561

Article VI **Registered Agent** 

JIM SFAKIANOS 362 GULF BREEZE PKWY. STE 101 GULF BREEZE, FL 32561

Article VII **Incorporator** 

JIM SFAKIANOS 362 GULF BREEZE PKWY, STE 101 GULF BREEZE, FL 32561

Article VIII **Date Incorporation to be Effective** 

November 11, 2008

\*

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 Age

Signature/Incorporator

11/11/08

| Date | Date |