

PO9000009398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700137119277

10/22/08--01027--001 **78.75

09 JAN 30 PM 11:00

FILED

218

COVER LETTER

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

SUBJECT: Kuester Corporations, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Jennifer Kuester

Name (Printed or typed)

1752 SW Del Rio Blvd.

Address

Port St Lucie, FL 34953

City, State & Zip

772-201-8898

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 12, 2009

JENNIFER KUESTER
1752 SW DEL RIO BLVD
PORT ST. LUCIE, FL 34953

SUBJECT: KUESTER CORPORATIONS, INC.
Ref. Number: W09000001314

We have received your document for KUESTER CORPORATIONS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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) 245-6052.

Paisley A Alford
Clerk
New Filing Section

Letter Number: 209A00000977

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:

Kuester Corporations, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1752 SW Del Rio Blvd
Port St Lucie, FL 34953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Tax Resolution

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Gregory Kuester
President
1752 SW Del Rio Blvd
Port St Lucie, FL 34953

ARTICLE VI REGISTERED AGENT

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

Gregory Kuester
1752 SW Del Rio Blvd
Port ST Lucie, FL 34953

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jennifer Kuester
1643 SW Carillo Ave
Port St Lucie, FL 34953

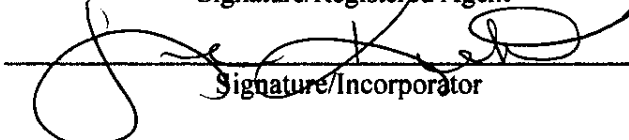
FILED
JAN 30 PM 11:00
09

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

1/22/09
Date



Signature/Incorporator

1/22/09
Date