P09888874468

| (Requestor's Name) | | | |
|---|---|---|---|
| (Address) | | | |
| (Address) | | | • |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | • | : | |
| (Document Number) | | | 2 |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | t | |
| | | | |

Office Use Only



800160016068

09/03/09--01013--013 **78.75

SECRETARY OF STATE FALLAHASSEE FLORIDA

MRDy 9/4

COVER LETTER

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

| SUBJECT: | Kat B. Creations, Inc. | | | |
|-------------------------|-----------------------------------|-------------------------------------|--|--|
| | (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) | |
| Enclosed are an orig | ginal and one (1) copy of the art | icles of incorporation and | d a check for: | |
| ☐ \$70.00 Filing Fee | | \$78.75 Filing Fee & Certified Copy | ☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status | |
| | | ADDITIONAL CO | DPY REQUIRED | |
| FROM: | | e (Printed or typed) | | |
| | 3710 N | E 18th Avenue | *************************************** | |
| | | Beach, Fl 33064 State & Zip | | |
| ****** | (954 |) 536-7689 Telephone number | | |
| | | tbcreations.com | notification | |

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 |
| ARTICLE I NAME | 09 SEP -3 AMII: 00 |
| The name of the corporation shall be: | |
| KAT B. CREATIONS, INC. | SECRETARY OF STATE TALLAHASSEE FLORIDA |
| ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: | |
| 3710 NE 18 AVENUE | |
| POMPANO BEACH, FL 33064 ARTICLE III PURPOSE | |
| The purpose for which the corporation is organized is: | LIZED É |
| KAT B. CREATIONS, INC. MAKES CUSTOM | ZED TTEMS: |
| MUGS, DOG BOWLS, SHIRTS, TILES, MOU. | SE PAOS ETC. FOR |
| The number of shares of stock is: | RE-SAL |
| List name(s), address(es) and specific title(s): RATHLEEN M. BAKER - PRESIDENT 3710 NE 18 AVENUE | |
| POMPANO BEH, FL 33064 | |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the reg | ristered agent is: |
| RATHLEED M. BAKER | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 3710 HE 18 AVENUE | |
| Pompano But, FL 33064 ARTICLE VII INCORPORATOR | |
| The <u>name and address</u> of the Incorporator is: | |
| KATHLEEN M. BAKER | |
| 3710 HE 18 AVENUE | |
| Pompano Bet, FL 33064 | ***** |
| Having been named as registered agent to accept service of process for the | he above stated corporation at the |
| place designated in this certificate, I am familiar with and accept the app | pointment as registered agent and |
| agree to act in this capacity | |
| Kathlun M. Balun | 8/30/09 |
| Signature/Registered Agent Kathlun W. Bahan | Date |
| Kathlun VI. Bahan | 8/30/09 |
| Signature/Incorporator | Date |