

PO9000093099

(Requestor's Name)

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(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

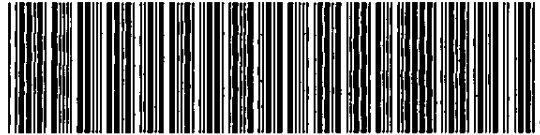
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Office Use Only



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2009 NOV 12 P 2:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2009 NOV 12 P 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-13-09
209



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2009

RIKEM JEANPHILIPPE
P. O. BOX 8445
DELRAY BCH, FL 33482

SUBJECT: KEM'S SERVICES, CORP.
Ref. Number: W09000048322

We have received your document for KEM'S SERVICES, CORP. and your check(s) totaling \$87.50. 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) 245-6995.

Wanda Cunningham
Regulatory Specialist II
New Filing Section

Letter Number: 709A00034368

COVER LETTER

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

SUBJECT: KEM'S ASSOCIATES SERVICES, CORP.
(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: Dr. TICA SAINT HILLIEN
Name (Printed or typed)

P O BOX 8445
Address

DELRAY BEACH
City, State & Zip

561-860-7293
Daytime Telephone number

KEM2SCHOOLS@YAHOO.COM
E-mail address: (to be used for future annual report 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)

ARTICLE I NAME

The name of the corporation shall be:

KEM'S ASSOCIATES SERVICES, CORP.

ARTICLE II PRINCIPAL OFFICE

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

1026 SOUTH 56TH AVENUE, HOLLYWOOD, FLORIDA 33023
P. O. BOX 8445, DELRAY BEACH, FLORIDA 33482

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INCOME TAX, CHECK CASHING, THRIFT SHOP, GROCERY STORES, IMMIGRATION SERVICES,

ARTICLE IV SHARES

The number of shares of stock is: 1500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

SECRETARY: SAINT HILLIEN, 104 N W 5 AVE, DELRAY BEACH, FL 33444.

PRESIDENT: FRANCESSE CEUS, 104 N W 5TH AVE, DELRAY BEACH, FL 33444,

VICE -PRESIDENT: RIKEM JEAN PHILIPPE, 104 N W 5TH AVE , DELRAY BEACH, FL 33444

ARTICLE VI REGISTERED AGENT

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

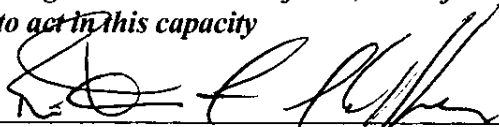
FRANCESSE CEUS: 104 N W 5 AVENUE, DELRAY BEACH, FL 33444

ARTICLE VII INCORPORATOR

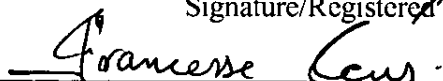
The name and address of the Incorporator is:

MED-AMERICAN HEALTH & TECHNOLOGY INSTITUTE, INC.
1026 SOUTH 56 AVENUE, HOLLYWOOD, FLORIDA 33023

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

11/8/2009

Date

11/8/2009

Date

FILED
2009 NOV 12 P 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA