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11-80-09

**COVER LETTER**

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

**SUBJECT:** JOHN W. KOLOZETSKI & ASSOCIATES, 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:** JOHN W. KOLOZETSKI  
Name (Printed or typed)

6342 FOREST HILL BLVD. #116  
Address

WEST PALM BEACH, FL 33415  
City, State & Zip

561.460.0797  
Daytime Telephone number

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:

JOHN W. KOLOZETSKI & ASSOCIATES, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

6342 FOREST HILL BLVD., WEST PALM BEACH, FL 33415

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

THE CORPORATION SHALL ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000 SHARES

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

JOHN W. KOLOZETSKI  
6342 FOREST HILL BLVD., WPB, FL 33415-PRESIDENT

**ARTICLE VI REGISTERED AGENT**

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

JOHN W. KOLOZETSKI  
6342 FOREST HILL BLVD., WPB, FL 33415

**ARTICLE VII INCORPORATOR**

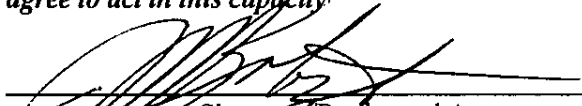
The name and address of the Incorporator is:

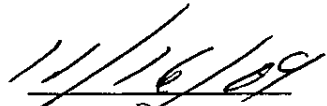
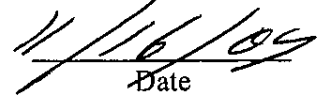
JOHN W. KOLOZETSKI  
6342 FOREST HILL BLVD., WPB, FL 33415

09 NOV 25 PM 3:01  
FILED  
STATE OF FLORIDA

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*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

  
\_\_\_\_\_  
Date  
  
\_\_\_\_\_  
Date