

P100000 13610

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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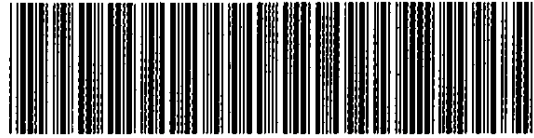
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W10000003716

*DR*

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*ch*

## COVER LETTER

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

**SUBJECT:** Knipfer Enterprises, 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:** Sabrina Knipfer

Name (Printed or typed)

4714 N. Habana Ave. apt#1305

Address

Tampa, Florida 33614

City, State & Zip

813-919-9029

Daytime Telephone number

sknipfer1982@yahoo.com

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

10 FEB 11 PM 12:34

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

January 27, 2010

SABRINA KNIPFER  
4714 N.HABANA AVE APT.#1305  
TAMPA, FL 33684-2573

SUBJECT: KNIPFER ENTERPRISES, INC.  
Ref. Number: W10000003716

We have received your document for KNIPFER ENTERPRISES, INC. 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 Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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) 245-6869.

Christine Haney  
Senior Clerk  
New Filing Section

Letter Number: 310A00001985

# 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:

Knipfer Enterprises, Inc.

Article VIII

No more than 100 shareholders.

## ARTICLE II PRINCIPAL OFFICE

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

Principal: 4714 N. Habana Ave Apt 1305  
Tampa, FL 33614

Mailing Address:  
P.O. Box 152573  
Tampa, FL 33684-2573

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

## ARTICLE IV SHARES

The number of shares of stock is:

50,000 common shares par values \$5

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sabrina Knipfer - President  
P.O. Box 152573  
Tampa, FL 33684-2573

## ARTICLE VI REGISTERED AGENT

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

Sabrina Knipfer  
4714 N. Habana Ave Apt #1305  
Tampa, FL 33614

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sabrina Knipfer  
P.O. Box 152573  
Tampa, FL 33684-2573

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SECRETARY OF STATE  
TALLAHASSEE, FL 32304

\*\*\*\*\*

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

Jun. 19, 2010  
Date

Jan 19, 2010  
Date