# P.1.0000022695

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(1.9, 1.1
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Remission given our phone for ording.
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Office Use Only



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## **COVER LETTER**

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

SUBJECT:	Uouble	h Hux	DE LAC	,
	(PROPOS)	ED CORPORAT	TE NAME – <u>MUST INCLU</u>	DE SUFFIX)
Enclosed are an orig	ginal and one (1) c	opy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of	of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
			ADDITIONAL CO	
FROM:	Alk Scott	Name	(Printed or typed)	······································
	1142 402	forest	terrace	
		A	ddress	
<u></u>	Sanford	<u>X lorida</u> City, S	3077( State & Zip	
	······································	407 5	74 95 96	
			elephone number	۸۰
· islana	E-mail addr		for future annual report no	

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



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 11, 2010

KYLE SCOTT 507 STILL FOREST TERRACE SANFORD, FL 32771

SUBJECT: DOUBLE K AUTO Ref. Number: W10000012372



We have received your document for DOUBLE K AUTO 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 document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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: 910A00006058

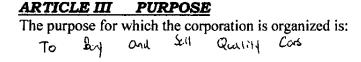
ARTICLES C	OF INCORPORATION
In compliance wi	th Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I	NAME
	ornoration shall be:



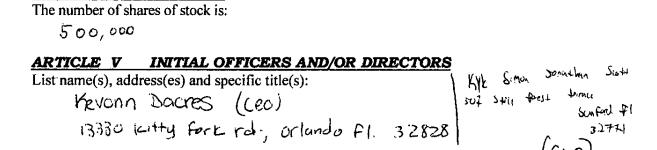
### ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: terace forest Still

561

ARTICLE IV

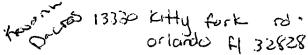


SHARES



Sunfor F1 32771

ARTICLE VI REGISTERED AGENT The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:



# ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

1d address of and Sinon Josephan Sinon Josephan Sinon terrace

507 Still foot terrace

Souton F1, 33771

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