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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
1/11/11

COVER LETTER

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

SUBJECT: Kostrada, 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: Natalie Beadle

Name (Printed or typed)

17103 64th Place North

Address

Loxahatchee, FL 33470

City, State & Zip

561-793-1863

Daytime Telephone number

nmbeadle@msn.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

Kostrada, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
17103 64th Place North
Loxahatchee, FL 33470

Mailing address, if different is:

P.O. Box 126
Loxahatchee, FL 33470

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To engage in any lawful activity.

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Natalie Beadle, CEO
Address: 17103 64th Place N.
Loxahatchee, FL 33470

Name and Title: _____
Address: _____

Name and Title: Michael Beadle, President
Address: 17103 64th Place N.
Loxahatchee, FL 33470

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Natalie Beadle
Address: 17103 64th Place N
Loxahatchee, FL 33470

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Natalie Beadle
Address: 17103 64th Place N
Loxahatchee, FL 33470

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

Natalie Beadle

Required Signature/Registered Agent

01/06/11

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Natalie Beadle

Required Signature/Incorporator

01/06/11

Date

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TALLAHASSEE FLORIDA