

P11000022722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500196740895

03/07/11--01062--007 **70.00

FILED
2011 MAR -7 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: AKS International Suppliers, 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: AKS International Suppliers, Inc.
Name (Printed or typed)

7700 Massachusettes Ave.
Address

New Port Richey, FL 34653
City, State & Zip

727-459-6789
Daytime Telephone number

courtneybrowning@hotmail.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAR -7 AM 11:20

FILED

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: **AKH International Suppliers, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
7700 Massachusettes Ave.
New Port Richey, FL 34653

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Purchase supplies for medical clinics.

ARTICLE IV SHARES

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Courtney Browning, President**
Address: **7700 Massachusettes Ave.**
New Port Richey, FL 34653

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: **Courtney Browning**
Address: **7700 Massachusettes Ave.**
New Port Richey, FL 34653

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Courtney Browning**
Address: **7700 Massachusettes Ave.**
New Port Richey, FL 34653

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


Required Signature/Registered Agent

02/28/2011

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.


Required Signature/Incorporator

02/28/2011

Date

FILED
2011 MAR -7 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA