

P110000031667

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

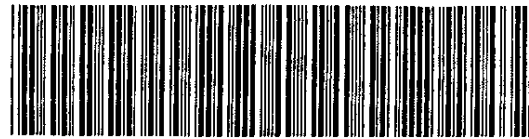
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11 MAR 29 PM 1:18

APPROVED
MAR 29 2011

W1100001531

COVER LETTER

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

SUBJECT: Kinky Intimates 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: Cynthia Centurion

Name (Printed or typed)

604 Wechsler Circle

Address

Orlando, FLorida - 32824

City, State & Zip

(407) 860-0047

Daytime Telephone number

martin_centurion@yahoo.com ✓

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

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



RECEIVED

11 MAR 28 PM 1:19

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 16, 2011

CYNTHIA CENTURION
604 WECHSLER CIRCLE
ORLANDO, FL 32824

SUBJECT: KINKY INTIMATES INC.
Ref. Number: W11000015315

We have received your document for KINKY INTIMATES 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 registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return 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) 245-6995.

Jessica A Fason
Regulatory Specialist II

Letter Number: 311A00006498

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

Kinky Intimates Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

604 Wechsler Circle

Orlando, Florida - 32824

Mailing address, if different is:

604 Wechsler Circle

Orlando, Florida - 32824

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Sell Intimate wear for Women and Men, Clothing, Lingerie, Accessories, Import, Export, and more

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cynthia Centurion - President

Address: 604 Wechsler Circle

Orlando, Florida - 32824

Name and Title: Martin Centurion - Vice President

Address: 604 Wechsler Circle

Orlando, Florida - 32824

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: Martin Centurion

Address: 604 Wechsler Circle

Orlando, Florida - 32824

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Martin Centurion

Address: 604 Wechsler Circle

Orlando, Florida - 32824

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

03/09/2011

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

03/09/2011

Date