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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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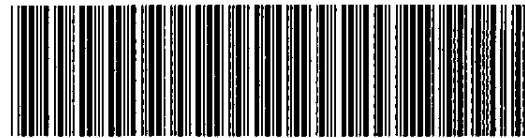
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV 10 PM 1:38

Ps 11/14/11

Don Koski Plumbing Contractor, Inc.

P.O. Box 3621

Hallandale, FL 33008

(954) 993-5128 Cell.
(954) 458-0068 Office

November 1, 2011

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern:

I incorporated my business as a corporation under the name Don Koski Plumbing Contractor, Inc.


I did not receive any notification for annual reports for 2011, as we moved the mailing address and a lot of our mail was never forwarded or received. We did NOT receive any notification via email of the annual report.

I have no intention of reinstating the old corporation filed under number P07000082701

I'm attaching the new Articles of Incorporation effectively immediately, along with a check for \$70

Should you have any questions, please do not hesitate to contact me

Sincerely,

 954-423-8604

Joan Steinmetz
Vice President

Don Koski Plumbing Contractor, Inc.
2661 Executive Center Circle
Tallahassee, FL 32301

Don Koski Plumbing Contractor, Inc.
2661 Executive Center Circle
Tallahassee, FL 32301

COVER LETTER

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

SUBJECT: DON KOSKI PLUMBING CONTRACTOR, 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: DON KOSKI PLUMBING CONTRACTOR, INC.
Name (Printed or typed)

PO BOX 3621
Address

HALLANDALE BEACH, FL 33008
City, State & Zip

954-474-9000 (CPA)
Daytime Telephone number

JOANFSTEINMETZ@GMAIL.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)

11 NOV 10 PM 1:38

ARTICLE I NAME

The name of the corporation shall be:

DON KOSKI PLUMBING CONTRACTOR INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

722 S DIXIE HWY
HALLANDALE, FL 33009

Mailing address, if different is:

PO BOX 3621
HALLANDALE, FL 33008

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
PLUMBING CONTRACTOR

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DONALD KOSKI, PRESIDENT
Address: PO BOX 3621
HALLANDALE, FL 33008

Name and Title: JOAN STEINMETZ, VP
Address: PO BOX 3621
HALLANDALE, FL 33008

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:

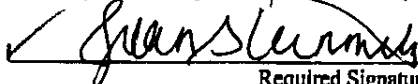
Name: JOAN STEINMETZ
Address: 722 S DIXIE HIGHWAY
HALLANDALE, FL 33009

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOAN STEINMETZ
Address: PO BOX 3621
HALLANDALE, FL 33008

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

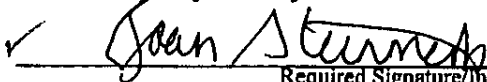


Required Signature/Registered Agent

11-4-11

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.



Required Signature/Incorporator

11-4-11

Date