

P12000038169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

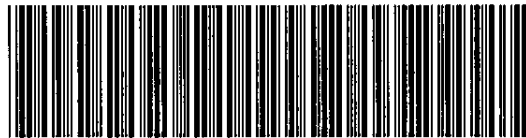
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12 APR 23 PM 3:43  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

1/4

**COVER LETTER**

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

**SUBJECT: K & K JEWELRY, 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: MARIELA TUMENE**

Name (Printed or typed)

**17021 N BAY ROAD # 818**

Address

**SUNNY ISLES, FL 33160**

City, State & Zip

**305-720-5815**

Daytime Telephone number

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** K & K JEWELRY, INC  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
17021 N BAY ROAD # 818  
SUNNY ISLES, FL 33160

FILED  
Mailing address, if different is:  
12 APR 23 PM 3:43

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
**PROFIT**

**ARTICLE IV SHARES**  
The number of shares of stock is: 100

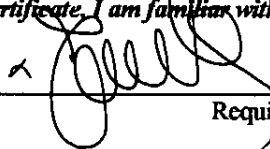
**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: <u>MARIELA TUMENE - PRESIDENT</u>	Name and Title: _____
Address: <u>17021 N BAY ROAD # 818</u>	Address: _____
<u>SUNNY ISLES, FL 33160</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**  
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
Name: MARIELA TUMENE  
Address: 17021 N BAY ROAD # 818  
SUNNY ISLES, FL 33160

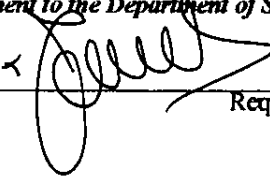
**ARTICLE VII INCORPORATOR**  
The name and address of the Incorporator is:  
Name: MARIELA TUMENE  
Address: 17021 N BAY ROAD # 818  
SUNNY ISLES, FL 33160

*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

4/17/12  
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

4/17/12  
Date