

712 0000 41814

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

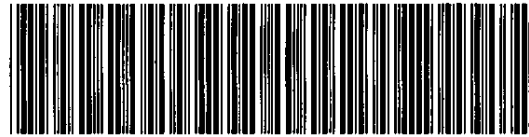
(Business Entity Name)

(Document Number)

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

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2012 MAY -3 AM 10:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers MAY 04 2012

## COVER LETTER

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

SUBJECT: Kraze Co.  
(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: Roval Permanand  
Name (Printed or typed)

800 Oak Bend Way  
Address

Sarasota, FL 34240  
City, State & Zip

941-378-3686  
Daytime Telephone number

~~krazeco@gmail.com~~ krazeco@gmail.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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**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:

Kraze Co.

## ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

800 Oak Bend Way  
Sarasota, FL. 34240

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sale of fashion wear. (Clothing, T-shirts, accessories)

## ARTICLE IV SHARES

The number of shares of stock is:

1,000. (One thousand)

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Reva Permand / President  
Address: 800 Oak Bend Way  
Sarasota, FL. 34240

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: Alisha Permand / Vice President  
Address: 800 Oak Bend Way  
Sarasota, FL. 34240

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: Alisha Permand  
Address: 800 Oak Bend Way  
Sarasota, FL. 34240

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alisha Permand  
Address: 800 Oak Bend Way  
Sarasota, FL. 34240

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

4-27-2012  
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

4-27-2012  
Date

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