

P12000052949

(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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05/29/12--01021--011 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUN 11 PM 2:04



RECEIVED

12 JUN 11 PM 1:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 30, 2012

KALETHA ANGELA MIMS
9133 LEE VISTA BLVD, APT 509
ORLANDO, FL 32829

SUBJECT: KALETHA ANGELA INC.
Ref. Number: W12000029658

We have received your document for KALETHA ANGELA INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6052.

Pamela Smith
Regulatory Specialist II

Letter Number: 612A00015510

COVER LETTER

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

SUBJECT: Kaletha Angela 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: Kaletha Angela Mims
Name (Printed or typed)

9133 Lee Vista Blvd
Address

Orlando Florida 32829 Apt 509
City, State & Zip

407-459-6003
Daytime Telephone number

MIMS.MIMSK@yahoo.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)

FILED
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DIVISION OF CORPORATIONS

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ARTICLE I NAME

The name of the corporation shall be: Kaletha Angela INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

9133 Lee Vista Blvd Apt 509
Orlando Florida 32829

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Designing, Purchasing, selling clothes
and accessories.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kaletha Angela Mims CEO

Address:

founder
9133 Lee Vista Blvd Apt 509
Orlando FL 32829

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:

Address:

Kaletha Angela Mims
9133 Lee Vista Blvd Apt 509
Orlando FL 32829

ARTICLE VII INCORPORATOR

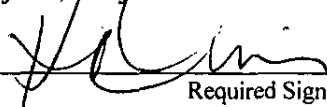
The name and address of the Incorporator is:

Name:

Address:

Kaletha Angela Mims
9133 Lee Vista Blvd Apt 509
Orlando FL 32829

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

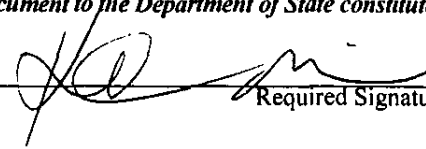


Required Signature/Registered Agent

5/22/12

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

5/22/12

Date