

P12000053643

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

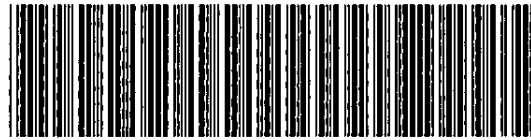
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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96
6/13

COVER LETTER

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

SUBJECT: TeamK-12
(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: SHARI CRUZ
Name (Printed or typed)

PO Box 17881
Address

Ft Lauderdale, FL 33318
City, State & Zip

954-316-8969
Daytime Telephone number

sharicruz@mindspring.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)

ARTICLE I NAME

The name of the corporation shall be: TeamK-1a, Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address

612 Holly Lane
Plantation, FL 33317

Mailing address, if different is:

PO Box 17881
Ft. Lauderdale, FL
33318

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide professional business products + services to individuals, groups, companies, organizations, and whomever else may request these products and services, for a fee.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SHARI CRUZ - President
Address: PO Box 17881
Ft. Lauderdale, FL
33318

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: SHARI CRUZ
Address: 612 Holly Lane
Plantation, FL 33317

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SHARI CRUZ
Address: PO Box 17881
Ft. Lauderdale, FL 33318

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

6/5/12

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

6/5/12

Date



June 5, 2012

To Whom it May Concern,

This letter is to inform all concerned that I, David Guise, authorized representative of Teamk-12, LLC, am aware that Teamk-12, Inc will be creating a corporation with a similar name and conducting the same and additional business services as Teamk-12, LLC. I am aware of this, and I approve of it.

Please contact me with any questions.

Regards,

David Guise

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DIVISION OF REGISTRATION
12 JUN 11 PM 3:40