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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

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

SUBJECT: K.I. One Motors 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: K.I. One Motors Inc.  
Name (Printed or typed)

680-112<sup>th</sup> N.W.  
Address

MIAMI, FLORIDA  
City, State & Zip

~~305~~ 305-758 9200  
Daytime Telephone number

Keepithundred2rocketmail.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: K.T. ONE Motors Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

680-112th NW  
MIAMI, FLORIDA

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Car Dealership.

**ARTICLE IV SHARES**

The number of shares of stock is: 2

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

Name and Title: Ludwig Morelles

Address: 20331 NE 10th COURT  
MIAMI, FL 33179  
President

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: Jameel Edoo

Address: 5900 NW 2nd AVE  
MIAMI, FL 33127

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Michael Daniels

Address: 4830 Ashland Drive  
TAMPA, FL 33610

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.

Jameel Edoo  
Required Signature/Registered Agent

11-14-12  
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.17.155, F.S.

Michael Daniels  
Required Signature/Incorporator

11/14/12  
Date

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA