

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
THEBES KAP FAMILY SERVICE INC**

Certificate of Status	0
Certified Copy	1
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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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:

THERES KAP FAMILY SERVICE INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:

10414 NW 24TH PLACE, STE 306
SUNRISE FL 33322 USA

Mailing address, if different is:

PO BOX 450055
HIATUS ROAD PO
SUNRISE FL 33345 USA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

GENERAL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DR EDNA EUPHEMIA TULLOCH - KING (P) Name and Title:

Address: 10414 NW 24TH PLACE, STE 306 Address:

SUNRISE FL 33322 USA

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: DR EDNA EUPHEMIA TULLOCH - KING

Address: 10414 NW 24TH PLACE, STE 306
SUNRISE FL 33322 USA

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: DR EDNA EUPHEMIA TULLOCH - KING

Address: 10414 NW 24TH PLACE, STE 306
SUNRISE FL 33322 USA

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

Edna E. Tulloch - King
Required Signature/Registered Agent

MARCH 6, 2013

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.

Edna E. Tulloch - King
Required Signature/Incorporator

MARCH 6, 2013

Date

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