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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: _____

REK Group, 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: _____

Lester Makofka, Esq.

Name (Printed or typed)

50 N. Laura Street, Suite 3550

Address

Jacksonville, FL 32202

City, State & Zip

904-355-2700

Daytime Telephone number

njpl@msn.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: REK Group, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4549 St. Augustine Road- Unit 26
Jacksonville, FL 32207

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Tire sales and installation and automotive repair

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anna Szczesniak

Name and Title: President

Address: 6328 Wedmore Road
Jacksonville, FL. 32258

Address: Director

Name and Title: Jaroslav Burnat

Name and Title: Vice-President

Address: 96155 Piedmont Drive
Fernandina Beach, FL 32034

Address: Director

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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TALLAHASSEE FLORIDA

(conti.)

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Lester Makofka

Address: 50 North Laura Street- #3550

Jacksobille, FL 32202

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lester Makofka

Address: 50 North Laura Street- #3550

Jacksonville, FL 32202

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

7/9/13

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

7/9/13

Date