

P130000 84 323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

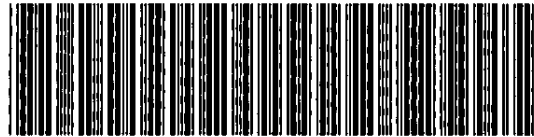
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/15/13--01039--010 **70.00

RECEIVED
13 OCT 15 PM 2:15
DIVISION OF CORPORATE AFFAIRS

APPROVED
AND
FILED
13 OCT 15 PM 2:26
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-Runners

(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: _____

Joseph Leroy Morris

Name (Printed or typed)

706 West Georgia St @ unit 1

Address

Tallahassee FL 32304

City, State & Zip

941-448-7123

Daytime Telephone number

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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: K Runners inc

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ARTICLE II PRINCIPAL OFFICE

Principal street address

706 West Georgia St unit 1
Tallahassee FL 32304

Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any And all Lawful Bussiness!

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joseph L Morris ^{owner} Name and Title: _____

Address: 706 west Georgia St Address: _____
Unit 1 Tallahassee
FL 32304

Name and Title: Rodrigue Anilus CEO Name and Title: _____

Address: 706 West Georgia St Address: _____
Unit 1 Tallahassee
FL 32304

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

APPROVED
AND
FILED

Name and Title: _____ Name and Title: _____ 13 OCT 15 PM 2:26
Address _____ Address: _____ SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Joseph L Morris
Address: 706 West Georgia St
Unit 1 Tallahassee FL 32304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Joseph L Morris
Address: 706 West Georgia St
Unit 1 Tallahassee FL 32304

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

10/15/13
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

10/15/13
Date