

PK000013579

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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14 FEB 12 PM 4:54
TALLAHASSEE, FLORIDA

1111-5978

MD 2/14

COVER LETTER

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

SUBJECT: _____

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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DUO-K, INC.

Name (printed or typed)

3591 MARIBELLA DR

Address

NEW SMYRNA BEACH FL 32169

City, State & Zip

859-991-0876

Daytime Telephone Number

JHOLTMAN@CPAWIN.COM

E-mail address: (to be used for future annual report notification)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2014

DUO-K, INC.
3591 MARIBELLA DR.
NEW SMYRNA BEACH, FL 32169

SUBJECT: DUO-K, INC.
Ref. Number: W14000005978

We have received your document for DUO-K, INC. and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 614A00001966

CERTIFICATE OF DOMESTICATION

The undersigned, HOWARD KLEIER, PRESIDENT
(Name) (Title)

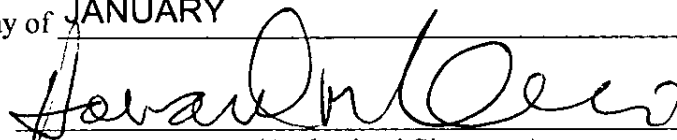
of DUO-K, INC. a foreign corporation,
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was FEBRUARY 6, 2002
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was KENTUCKY
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was DUO-K, INC.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is DUO-K, INC.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was KENTUCKY
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am SHAREHOLDER, of DUO-K, INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 14 day of JANUARY, 2014


(Authorized Signature)

Filing Fee:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

DUO-K, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address

Mailing Address

3591 MARIBELLA DRIVE

SAME

NEW SMYRNA BEACH, FL

32169

32168 (circled)

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

BUSINESS CONSULTING

14 FEB 12 PM 4:54
SECRETARY OF STATE
FLORIDA

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 1000

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name

President/Howard Kleier

Vice-President/Terry Kleier

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Termy Kleier

3591 MARIBELLA DRIVE

NEW SMYRNA BEACH FL

32169

32168 (OK)

FILED
14 FEB 12 PM 4:54
CLERK OF DISTRICT COURT
STATE OF FLORIDA

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

3591 MARIBELLA DRIVE

NEW SMYRNA BEACH FL

32169

32168 (OK)

Howard Kleier

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

Termy Kleier
Signature/Registered Agent

2-7-14
Date

Howard Kleier
Signature/Incorporator

1-15-14
Date