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Robert D. Herpst Attorney at Law 11 Trotters Lane Mahwah, NJ 07430 201-236-0979

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

SUBJECT: Khrysos	Capital, Inc.		_
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCLU</u>	I <u>DE SUFFIX</u>)
Enclosed are an origin \$70.00 Filing Fee	al and one (1) copy of the art \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status

Robert D. Herpst	
	Name (Printed or typed)
11 Trotters Lane	
	Address
Mahwah, NJ 07430	
	City, State & Zip
973-478-8944	
	Daytime Telephone number
wh =	·
rherpst@optonline.ne	
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 NAM The name of the corporati	E Khrysos Capita	II, Inc.			
3002 Dupont Stree	RTICLE II PRINCIPAL OFFICE Principal street address		Mailing address, if different is: 11 Trotters Lane Mahwah, NJ 07430		
ARTICLE III PURI	POSE		 .		
• •	nich the corporation is orga				
	to the laws of the State of				
•			· · · · · · · · · · · · · · · · · · ·		
The number of shares of s	RES 1,000,000 shares, wistock is:		e		
	: Janis Black <u>, Director</u>		and Title:	\mathbb{R}^{2} or	
Address	3002 Dupont Street	Address:			
	Eustice, FL 32726	<u> </u>	- 10 - 11 - 11		
Name and Title.		Nama	and Title:		
			and thie:		
Address		Address:			
Name and Title:		Name	and Title:		
Address		Address:			
		.			

Name and	d Title:	Name and	Title:	
Address		Address:		
				
				
ARTICLE VI	REGISTERED AGENT			
	orida street address (P.O. Box NOT acceptable	e) of the registered age	nt is:	
Name:	Janis Black			
name.	3002 Dupont Street			<u> </u>
Address:	Eustice, FL 32726			TT
			三 記。 記、3	12 J 19 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	***************************************		60 € 3 	့ မ
ARTICLE VII	INCORPORATOR	•	- n 1,	77
The name and ad	<u>dress</u> of the Incorporator is:		 27	19
Name:	Janusz R. Golebiowski		7% 60 1	្ <u>ម</u> ប
	ul. Rolnicza 93		₹	
Address:	Lominaki 05-092, Poland			
Uanina kaan nam	ned as registered agent to accept service of pro	rage for the above sta	tad cornoration at the pl	nea dasignatad in
this certificate, I d	ned as registered agent to accept service by pro im familiar with and accept the appointment a	s registered agent and	agree to act in this capac	rce aesignatea m city
	Lanis Black		Echruar	. 10 2014
	Required Signature/Registered Agent	<u>/</u>	rebluar	y 10, 2014 Date
<i>[</i>				
I submit this dod	ument and affirm that the facts statelt berein Department of State constitutes of thirst degree j	are true. I am aware felow as provided for i	that the false information s 817 155 F.S.	on submitted in a
uocumeni io ine i	$1 \sim 1 \sim 1 \sim 100 $	///		
	anus Holeso.	wski_	February	
	Required Signature/Incorporator			Date
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