

PK40000031367

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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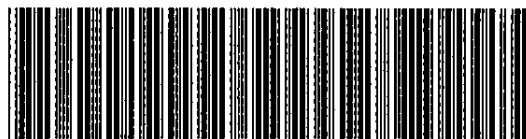
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MD 4/8

COVER LETTER

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

SUBJECT: KG WORLDWIDE 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: KG WORLDWIDE INC
Name (Printed or typed)

872 WEST 39 PLACE
Address

HALEAH FL 33012
City, State & Zip

786 615 3241
Daytime Telephone number

Treasurydepartment@rdesijy.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: KG WORLDWIDE INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

872 WEST 39 PLACE
HAIALEAH FL 33012

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: online commerce

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CEO / ALBERT MEDINA Name and Title: EDWARD MILIAN

Address: 872 WEST 39 PL Address: 16204 SW 18 PL
HAIALEAH FL 33012 MIRAMAR FL 33027
Director

Name and Title: CYNTHIA RIVERA Name and Title: JASON LOPEZ

Address: 6801 Park Street Address: 872 W 39 PL
HOLLYWOOD FL 33024 HAIALEAH FL 33012
Director Director

Name and Title: Daniel Milian Name and Title: VP / Amado E. Yaber

Address: 16204 SW 18 PL Address: 3905 W 8th Way, 33012
MIRAMAR FL 33027 HAIALEAH FL
Director

(conti.)

Name and Title: DANIEL FERNANDEZ Name and Title: _____
Address: 7950 NW 176 Address: _____
HIALEAH, FL _____
33015 _____

ARTICLE VI REGISTERED AGENT

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

Name: ALBERT MEDINA
Address: 872 W 39 PL
HIALEAH FL 33012

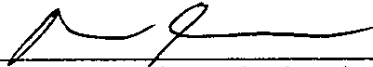
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ALBERT MEDINA
Address: 872 W 39 PL
HIALEAH FL 33012

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TALLAHASSEE, FLORIDA

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

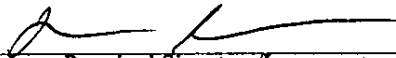


Required Signature/Registered Agent

3-27-14

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

3-27-14

Date