

MAY/06/2014/TUE 11:26 AM

FAX No.

P. 001

P14 000039961

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION
KENLAC CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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DIVISION OF CORPORATIONS
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FAX No.

P. 002

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: **KENLAC CORP**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1600 PONCE DE LEON BLVD

10th FLOOR # 71

CORAL GABLES, FL 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

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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: **GLAUCO DE FILIPPO (P/D)**

Name and Title: _____

Address **1600 PONCE DE LEON BLVD**

Address: _____

10th FLOOR # 71

CORAL GABLES, FL 33134

Name and Title: **JOHNNY DE FILIPPO (V/D)**

Name and Title: _____

Address **1600 PONCE DE LEON BLVD**

Address: _____

10th FLOOR #71

CORAL GABLES, FL 33134

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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P. 003

(cont.)

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: GLAUCO DE FILIPPO

Address: 1600 PONCE DE LEON BLVD 10th FL #71

CORAL GABLES, FL 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GLAUCO DE FILIPPO

Address: 1600 PONCE DE LEON BLVD 10th FL #71

CORAL GABLES, FL 33134

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

glauco de filippo

Required Signature/Registered Agent

5/06/14

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.

glauco de filippo

Required Signature/Incorporator

5/06/14

Date