

P14 0000 41252

(Requestor's Name)

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(Business Entity Name)

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SECRETARY FOR THE
DIVISION OF ORGANIZATION
14 MAY - 6 PM 4:20

COVER LETTER

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

SUBJECT: I Need Kelly 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Kelly Keathley
Name (Printed or typed)

4319 Hidden Lakes Dr.
Address

Niceville FL 32578
City, State & Zip

(850) 376-0912
Daytime Telephone number

ineedkellynow@gmail.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: I Need Kelly Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4319 Hidden Lakes Dr.
Niceville FL 32578

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide Freelance administra-
tive services

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kelly Keathley, President Name and Title: _____

Address 4319 Hidden Lakes Dr. Address: _____
Niceville, FL 32578

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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SECRETARY OF STATE
DIVISION OF CORPORATE FILINGS

(conti.)

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: Kelly Keathley

Address: 4319 Hidden Lakes Dr.

Niceville Fl 32578

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kelly Keathley

Address: 4319 Hidden Lakes Dr.

Niceville Fl 32578

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SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS

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

Kelly Keathley

Required Signature/Registered Agent

4/29/14

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.

Kelly Keathley

Required Signature/Incorporator

4/29/14

Date