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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : RADSON DEMPSEY, PA
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Fax Number : (844) 737-2329

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Katrina@radsondempsey.com

FLORIDA PROFIT/NON PROFIT CORPORATION

ZK Brock, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUL 31 AM 11:26

APPROVED
AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUL 31 PM 3:00

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Corporate Filing Menu

Help

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COVER LETTER

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

SUBJECT: ZKBrock, 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: Katrina H. Dempsey, Esq.

Name (Printed or typed)

600 Jennings Avenue

Address

Eustis, FL 32726

City, State & Zip

352-589-1414

Daytime Telephone number

katrina@radsondempsey.com

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

NOTE: Please provide the original and one copy of the articles.

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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: ZKBrock, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

29027 Shirley Shores Road
Tavares, FL 32778

Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: all lawful purposes

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Zachary K. Brock, Pres/Sec/Treas

Address: 29027 Shirley Shores Road
Tavares, FL 32778

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Zachary K. Brock
Address: 29027 Shirley Shores Road
Tavares, FL 32778

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Zachary K. Brock
Address: 29027 Shirley Shores Road
Tavares, FL 32778

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

7/28/14
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

7/28/14
Date