

P14000064814

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

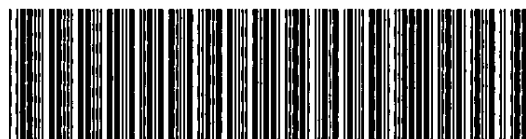
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2014 AUG -1 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: kailex Management Group, 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

Order # R106156542184

FROM: Marie Wallace

Name (Printed or typed)

8761 North Crescent Drive

Address

Miramar, Florida 33025

City, State & Zip

954-394-6490

Daytime Telephone number

C2lekail@yahoo.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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Kailex Management Group, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8761 North Crescent Drive
Miramar, Florida 33025

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Kailex Management Group, Inc.,
provides program, project, management and consulting services to
business entities.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marie Wallace, President

Name and Title: _____

Address 8761 North Crescent Dr.

Address: _____

Miramar, Florida

33025

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(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: Marie Wallace
Address: 8761 North Crescent Drive
Miramar, Florida 33025

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Marie Wallace
Address: 8761 North Crescent Drive
Miramar, Florida 33025

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

Marie Wallace
Required Signature/Registered Agent

7/25/14
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.

Marie Wallace
Required Signature/Incorporator

7/25/14
Date