

P 14000072811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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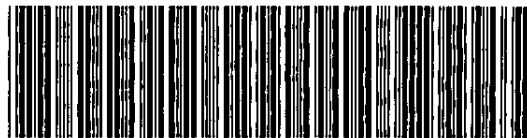
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/28/14--01019--013 **70.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/2/14

COVER LETTER

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

SUBJECT: KLAW Investments, 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: Luke Teeling
Name (Printed or typed)
3110 Moran Rd
Address
Tampa, FL 33618
City, State & Zip
813-340-4648
Daytime Telephone number
freelancemason@yahoo.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: KLAW Investments, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1021 14th St N

St. Pete, FL 33705

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Investments

ARTICLE IV SHARES

The number of shares of stock is: 90,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jason Kotsko / Officer Name and Title: _____

Address: 1021 14th St N Address: _____
St Pete FL 33705

Name and Title: Luke Teeling / Officer Name and Title: _____

Address: 3110 Moran Rd Address: _____
Tampa, FL 33618

Name and Title: Adam Warchal / Officer Name and Title: _____

Address: 909 New Jersey Ave SE Address: _____
Apt 1010
Washington D.C. 20003

(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: Luke Teeling

Address: 3110 Moran Rd

Tampa, FL 33618

ARTICLE VII INCORPORATOR

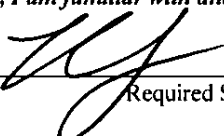
The name and address of the Incorporator is:

Name: Luke Teeling

Address: 3110 Moran Rd

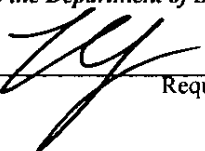
Tampa, FL 33618

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

 Luke Teeling
Required Signature/Registered Agent

8/24/14
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.

 Luke Teeling
Required Signature/Incorporator

8/24/14
Date

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TALLAHASSEE, FLORIDA