

P14000073332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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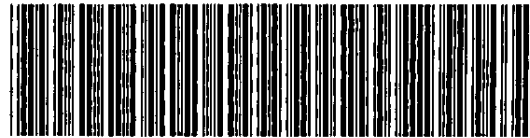
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/02/14--01012--009 **87.50

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14 SEP -2 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/4/14

COVER LETTER

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

SUBJECT: K K Carpentry 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: Kenneth W. Knoke

Name (Printed or typed)

628 Tangerine St.

Address

Nokomis, FL 34275

City, State & Zip

941-587-3423

Daytime Telephone number

kennyknoke@gmail.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: K K Carpentry Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

628 Tangerine St.
Nokomis, FL 34275

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MAILING ADDRESS, IF DIFFERENT IS:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to do business as an S Corporation.

The type of business is residential remodeling.

ARTICLE IV SHARES

The number of shares of stock is: 1,000 valued at \$1.00 each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kenneth W. Knoke, President & Owner

Name and Title: _____

Address 628 Tangerine St.

Address: _____

Nokomis, FL 34275

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(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:

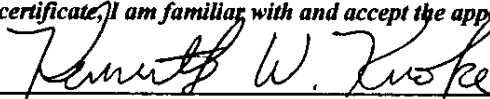
Name: Kenneth W. Knoke
Address: 628 Tangerine St.
Nokomis, FL 34275

ARTICLE VII INCORPORATOR

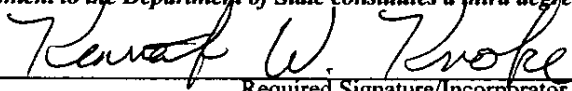
The name and address of the Incorporator is:

Name: Kenneth W. Knoke
Address: 628 Tangerine St.
Nokomis, FL 34275

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

 8/27/14
Required Signature/Registered Agent 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.

 8/27/14
Required Signature/Incorporator Date

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TALLAHASSEE, FLORIDA