P15000058113

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

21415 0

COVER LETTER

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

SUBJECT: Domestication of Kevin Bove Enterprises, Inc.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication

\$ 50.00

Articles of Incorporation and Certified Copy \$_78.75

Total to domesticate and file

\$128.75

OPTIONAL:

Certificate of Status

\$ 8.75

Kevin Bove Enterprises, Inc.

Name (printed or typed)

4201 SW Sundown Lane

Address

Palm City, Florida 34990

City, State & Zip

631-697-7272

Daytime Telephone Number

kevinfbove@gmail.com

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

CERTIFICATE OF DOMESTICATION

Th	e undersigned,	Kevin Bove		Preside	nt
	-		(Name)		(Title)
٥f	Kevin Bove	Enterprises,	inc.		a foreign corporation,
in	accordance wit	(Corporation) (Corporation) (Corporation) (Corporation)		loes hereby certify:	<u> </u>
1.	The date on w	bich corporation	was first forme	d was March 28	, 2013
2.	The jurisdiction	on where the abo	ye named corpo ork State	ration was first formed	l, incorporated, or otherwise
3.		ne corporation in ove Enterpris		to the filing of this Co	ertificate of Domestication
4.				articles of incorporations S Kevin Bove Enter	on, to be filed pursuant to erprises, Inc.
5.	administration immediately be	of the corporation	on, or any other f the Certificate		ce of business or central under applicable law,
б.	Attached are F to s. 607.1801.		incorporation to	o complete the domesti	ication requirements pursuant
I aı	n Presdient	, of Ke	vin Bove Ent	erprises, Inc.	
	am authorized this the 17th o		ificate of Dome	stication on behalf of t	he corporation and have done , 2015
		* Fal	(Authorize	d Signature)	
		Certificate of i Articles of Inc Total to dome	Domestication orporation and	g Fee: l Certified Capy	\$ 50.00 <u>\$ 78.75</u> \$128.75

INHS53 (12/12)

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:	
Kevin Bove Enterprises, Inc.	
ARTICLE II PRINCIPAL OFFICE	
THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRE	ESS IS: Mailing Address
4201 SW Sundown Lane	4201 SW Sundown Lane์
Palm City, FL 34990	Mailing Address 4201 SW Sundown Lane Palm City, FL 34990
ARTICLE III PURPOSE	
THE PURPOSE FOR WHICH THE CORPORATION IS OF	
This corporation is formed to engage in	n any lawful act or activity for which
corporations may be organized under th	e Business Corporation Law. The corporation
is not formed to engage in any act or ac	ctivity requiring the consent or approval of any
state official, department, board, agency	or other body without such consent or approva
first being obtained.	
·	
* ************************************	

ARTICLE	ΙV	SHARES

THE NUMBER OF SHARES OF STOCK IS

200

ARTICLE V	INITIAL	DIRECTORS	AND/OR	OFFICEDS
MILITARY V	4444 44644	DIRECTORS	AMU/ UK	UFFILERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name Kevin Bove, President	Title/Name
Title/Name	Title/Name
Title/Name	Title/Name
Title/Name	Title/Name

ARTICLE VI INITIAL REGISTERED AGENT AND	D STREET ADDRESS
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTA	ABLE) OF THE REGISTERED AGENT IS:
Kevin Bove	
4201 SW Sundown Lane	
Palm City, Florida 34990	
ARTICLE VII INCORPORATOR THE NAME AND ADDRESS OF THE INCORPORATOR IS: Strategic Accounting Services, Inc.	•
1660 Route 112 - Suite A	
Port Jefferson Station, NY 11776	
**************************************	*****
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CE. ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE	RTIFICATE, I AM FAMILIAR WITH AND TO ACT IN THIS CAPACITY.
Signature/Registered Agent	6/17/15 Date
1 40	6/17/15
Signature/Incorporate Alimon	Date