

P15000092472

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

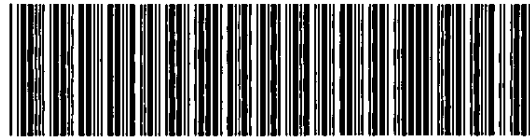
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TALLAHASSEE, FLORIDA
15 NOV -9 AM 9:12

NOV 16 2015

T CANNON

COVER LETTER

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

SUBJECT: KLKL , Enterprise, 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: Kurt Michael Looby

Name (Printed or typed)

10923 NW 70th Ct

Address

Parkland, FL 33076

City, State & Zip

9542037603

Daytime Telephone number

k.looby@yahoo.com

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

15 NOV -9 14:12:19

TALLAHASSEE, FLORIDA

October 12, 2015

KURT MICHAEL LOOBY
10923 NW 70TH CT
PARKLAND, FL 33076 US

SUBJECT: KML ENTERPRISE, INC
Ref. Number: W15000067549

We have received your document for KML ENTERPRISE, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is J69299.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tina D Cannon
Regulatory Specialist II

Letter Number: 915A00021563

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

15 NOV -9 AM 9:12

ARTICLE I NAME

The name of the corporation shall be: KLKL Enterprise, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10923 NW 70th Ct

Parkland , FL 33076

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any Lawful Business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kurt Looby- CEO

Name and Title: Lynisha Samuel Looby- Pres

Address 10923 NW 70th Ct

Address: 10923 NW 70th Ct

Parkland

Parkland

Florida 33076

Florida , 33076

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Kurt Looby
 Address: 10923 NW 70th CT
 Parkland FL 33076

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kurt Looby
 Address: 10923 NW 70th CT
 Parkland, FL 33076

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
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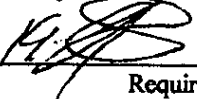
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

9/29/2015
 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

9/29/2015
 Date