

P 16000000252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

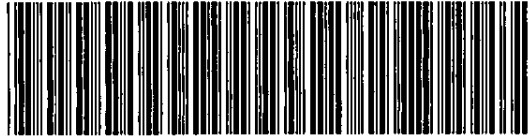
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/21/15--01001--023 **78.75

15 DEC 21 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

COVER LETTER

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

SUBJECT: King Wealth Management, 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: Patrick D. King

Name (Printed or typed)

2671 Swamp Cabbage Ct.

Address

Fort Myers, FL 33901

City, State & Zip

239-278-1976

Daytime Telephone number

patrick.king@raymondjames.com

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

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

APPROVED
AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: King Wealth Management, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2671 Swamp Cabbage Ct.

Fort Myers, FL 33901

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide a more professional environment and title for

Patrick D. King a Financial Advisor, Branch Manager and Registered Principal with Raymond James Financial Services.

Goals and to expand the business and grow and ultimately transfer the business in part to Daniel C. King, my son.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Patrick D. King, President and Secretary

Name and Title: Daniel C. King, Vice President

Address 1476 Argyle Dr.
Fort Myers, FL 33919

Address: 1476 Argyle Dr.
Fort Myers, FL 33919

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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AND
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Patrick D. King

Address: 2671 Swamp Cabbage Ct.

Fort Myers, FL 33901

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Patrick D. King

Address: 2671 Swamp Cabbage Ct.

Fort Myers, FL 33901

ARTICLE VIII EFFECTIVE DATE:

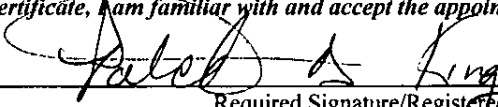
Effective date, if other than the date of filing: 1-1-2016 (OPTIONAL)

January 1, 2016

(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

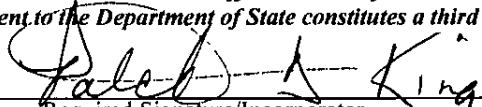


Required Signature/Registered Agent

12/16/2015

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

12/16/2015

Date