

P16000008003

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

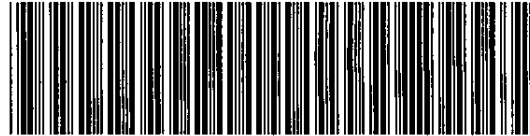
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JAN 27 2016  
S. GILBERT

FILED  
16 JAN 11 PM 3:18  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** R. K. Metal Works Mfg. Corporation

(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Ryan Kaufman  
\_\_\_\_\_  
Name (Printed or typed)

5030 NW 109th ave. SUITE J  
\_\_\_\_\_  
Address

Sunrise, Florida 33351  
\_\_\_\_\_  
City, State & Zip

754-244-1755  
\_\_\_\_\_  
Daytime Telephone number

Ryanckaufman@gmail.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

**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: R. K. Metal Works Mfg. corporation

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

5030 NW 109th ave. SUITE J

Sunrise, FL 33351

Mailing address, if different is: STATE

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DADE COUNTY, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Metal Manufacturing, design and engineering of metal parts  
as well as repair of metal parts

**ARTICLE IV SHARES**

The number of shares of stock is: 500

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Ryan Kaufman - CEO

Name and Title: \_\_\_\_\_

Address 8956 nw 38th Dr.

Address: \_\_\_\_\_

Coral springs, FL 33065

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: Ryan Kaufman

Address: 5030 NW 109th ave. SUITE J

Sunrise, FL 33351

**ARTICLE VII INCORPORATOR**

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

Name: Ryan Kaufman

Address: 8956 nw 38th dr.

Coral springs, FL 33065


**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

1/7/16  
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

1/7/16  
Date