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(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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COVER LETTER

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

subject: <u>Ky</u>	eitlow + ASSO (PROPOSED CORPORA	ciales Invest	igative Scr	<u>vi</u> ces, Inc.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLI</u>	UDE SUPPLX)				
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:				
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status				
		ADDITIONAL CO	PY REQUIRED				
FROM: Kristi Kreitlow Name (Printed or typed)							
6716 Chant Trail Address							
Tallanassce, FL 32309 City, State & Zip							
Daytime Telephone number							
	WFKiwcstigo E-mail address: (to be use						

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	on shall be: Kreitlow +	Associates	Investigative	Service
ARTICLE II PRINCI	PAL OFFICE rincipal <u>street</u> address	N	Mailing address, if different is:	(VC
	ut Trail			
Tallanass	cc, FL 32309			
ARTICLE III PURPOS The purpose for which the	corporation is organized is:			
	Private Investig	gati on		<u></u>
		4		V 11 5 11 11 11 11 11 11 11 11 11 11 11 1
ARTICLE IV SHARES The number of shares of st	<u>s</u> tock is:20		TAS:	16
ARTICLE V INITIAL	OFFICERS ANDIOR DIRECTORS			To The
	Kristi Krcitlow		Are ON H	
	President		E.G.	
Address _	Willo Chant Trail		S.A.	32
-	Tallahassee FL			
Name and Title:_	Walter Krcitlow	Name and Title:		<u></u>
	Vice President			
_	107110 Chant Tro	<u>uil</u>		
	Tallahassec FL	32309		
Name and Title:_		Name and Title:		
Address _		Address:		
-				,

Name and Title	: N	ame and Title:
Address	A	ddress:
ARTICLE VI REGIS	STERED AGENT	
	street address (P.O. Box NOT acceptable) of the	e registered agent is:
Name:	Kinsti Krcitlow	
Address:	6716 Chant Trail	
	Tallahassce, FL 323	09
ARTICLE VII INCO	<u>RPORATOR</u>	
The name and address	of the Incorporator is:	
Name:	Kristi Krcitlow	
Address:	6716 Chant Trail	
-	Tallahassee FL 32	909
ARTICLE VIII EFF.	ECTIVE DATE:	
Effective date, if other	than the date of filing:	(OPTIONAL)
(If an effective date is days after the filing.)	listed, the date must be specific and cannot b	e more than five business days prior or 90 business
	red in this block does not meet the applicable state at the Department of State's records.	tutory filing requirements, this date will not be listed as
Having been named as this certificate, I am fac	registered agent to accept service of process fo miliar with and accept the appointment as regist	r the above stated corporation at the place designated in ered agent and agree to act in this capacity
Kuisa	r kratlow	
,	Required Signature/Registered Agent	Date
I submit this documen document to the Depar	t and affirm that the facts stated herein are tri tment of State constitutes a third degree felony i	te. I am aware that the false information submitted in a ss provided for in s.817.155, F.S.
Wis	SN Watuw gnature/Incorporator	
Required Si	gnature/Incorporator	Date

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