

Division of Corporations

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**P1600037798**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6381

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Account Name : NOTARY-TAXES & CORPORATE FILING SERVICES INC.  
Account Number : I20120000057  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION**

ATK ~~Services, Inc.~~ *Services, Inc.*

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

*WLBW 3/858*

APR 29 2016

T. SCOTT

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4/27/2016 2:24:35 PM PAGE 1/001 Fax Server



April 27, 2016

FLORIDA DEPARTMENT OF STATE

NOTARY-TAXES & CORPORATE FILING SERVICES INC.  
Division of Corporations

SUBJECT: ATK, INC.  
REF: W16000031214

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is L10000079033 (AT&K, LLC).

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

TANYA L HENDERSON  
Regulatory Specialist II

FAX Aud. #: H16000103009  
Letter Number: 916A00008742

P.O BOX 6327 - Tallahassee, Florida 32314

**H16000103009****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: ATK SERVICES, INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

808 Brickell Key Dr.,Suite #3303Miami, FL 33131**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 500 Common Stock \$1.00/Share**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Agela Toro-Kaplan(President, ST)

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

Address

808 Brickell Key Dr.,

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

Suite #3303Miami, FL 33131

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

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

Address

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

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

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

Address

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

F.H.D.  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 16 APR 28 AM 8:10

**H16000103009**

**H16000103009**

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: Carlos Garcia, CPA  
Address: 10661 N. Kendall Dr., #220  
Miami, FL 33176

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Carlos Garcia, CPA  
Address: 10661 N. Kendall Dr., #220  
Miami, FL 33176

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 04/25/2016

(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

04/25/2016

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.817.135, F.S.*

\_\_\_\_\_  
Required Signature/Incorporator

04/25/2016

Date

**H16000103009**