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COVER LETTER

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

SUBJECT: KM	K Engineering Inc (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an	original and one (1) copy of the art	icles of incorporation and	i a check for:	
☐ \$70.0 Filing Fe	## \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:		e (Printed or typed)		18 H
	5428 Parkway Drive		,	
		Address		: ::::::::::::::::::::::::::::::::::::
	Belle Isle, FL 32809			
	City,	State & Zip	, C	S PRIDE
	407-961-9144			\rightarrow
	Daytime T	elephone number	 	
	kmkeeney@hotmail.com			
•	F-mail address: (to be used	d for future annual report	otification)	

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II PR 5428 Parkway Driv	Principal street address	Mailing address	, if different is:
Belie Isle, FL 32809			
ARTICLE III PUT The purpose for whi	RPOSE Engine ch the corporation is organized is:		
			<u>→</u>
ARTICLE IV SH. The number of share	ARES s of stock is:		CRETARY OF S
	TIAL OFFICERS AND/OR DIRECTORS Fitle:		STATE CORIDA 8: 32
Address	5428 Parkway Drive Belle Isle, FL, 32809		
	Belle Iste, I L, 32007		
Name and T		Name and Title:	
Address	5428 Parkway Drive Belle Isle, FL, 32809	Address:	
	Delic Isic, FL, J2007		
Name and T	itle: Kevin Keeney, Secretary	Name and Title:	
Address	5428 Parkway Drive	Address:	

Address: Belle Isle, FL, 32809 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Kevin Keeney 5428 Parkway Dr Belle Isle, FL 32809 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Kevin Keeney Address: Selle Isle, FL 32809 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Kevin Keeney Address: 5428 Parkway Dr Belle Isle, FL 32809 ARTICLE VII EFFECTIVE DATE: Ciffeetive date, if other than the date of filing: Ciffeetive date, if other than the date of filing: Ciffeetive date, if other than the date of filing: Ciffeetive date, if other than the date of 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 corulificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Stepasture/Registered Agent Is submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Required Stepasture/Registered Agent Required Stepasture/Registered Agent Address: Date	Name an	d Title:	Name and Title:
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Name: Section Section	The manus and ad	Iduara of the Incomparton in	
Address: S428 Parkway Dr	ne <u>name and ad</u>	··	
Belle Isle, FL 32809 **RATICLE VIII EFFECTIVE DATE: Coptional If an effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business lays 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. Claving 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 Submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in locument to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	Name:	Kevin Keeney	<u> </u>
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Effective date, if other than the date of filing:		Belle Isle, FL 32809	32 RIDA
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Required Signature/Incorporator // Date			
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	Requi	red Signature/Incorporator	Date