

P/600005/140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

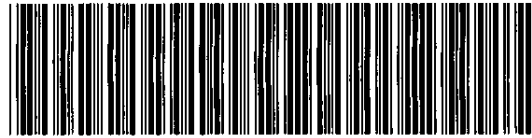
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/15/16 --01006 --002 **\$7.50

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DEPARTMENT OF STATE
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06/15/16

COVER LETTER

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

SUBJECT:

Randy Kyllonen & Sons, 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:

Randy Kyllonen & Sons

Name (Printed or typed)

7355 Hardaway Hwy

Address

Chattahoochee FL 32324

City, State & Zip

850-556-8449

Daytime Telephone number

Johnette.Kyllonen@yahoo.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: Randy Kyllonen & Sons, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7355 Hardaway Hwy
Chattahoochee FL 32324

same as

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To deliver & install mobile homes &
manufactured homes

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE IV SHARES

The number of shares of stock is: 1000.

ARTICLE V INITIAL OFFICERS AND DIRECTORS

Name and Title: Johasette Kyllonen CEO

Name and Title: Randolph W Kyllonen VP

Address: 7355 Hardaway Hwy
Chattahoochee FL
32324

Address: 7355 Hardaway Hwy
Chattahoochee FL
32324

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: Schvette Kylanen
Address: 7355 Hardaway Hwy
Chattahoochee, FL 32324

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TALLAHASSEE
FLORIDA

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Schvette Kylanen
Address: 7355 Hardaway Hwy
Chattahoochee, FL 32324


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.)

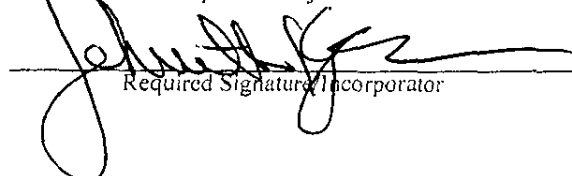
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

6-15-16
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

6-15-16
Date