

P16000055385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

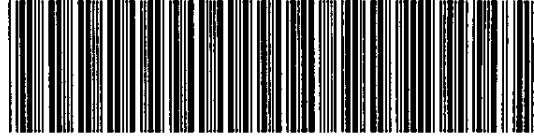
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W16-44314

Office Use Only



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FILED
16 JUN 30 PM 12:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

HH

COVER LETTER

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

SUBJECT: K & R Optics 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Kevin Gonsiewski

Name (Printed or typed)

20019 Manecke Rd

Address

Brooksville, Fl 34601

City, State & Zip

727-410-1825

Daytime Telephone number

Kevingonsiewski@yahoo.com

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 21, 2016

KEVIN GONSIEWSKI
20019 MANECKE RD
BROOKSVILLE, FL 34601

SUBJECT: K & R ENTERPRISES INC.
Ref. Number: W16000044314

We have received your document for K & R ENTERPRISES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 816A00013055

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

16 JUN 30 PM 12:55

ARTICLE I NAME

The name of the corporation shall be: K & R Optics INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

20019 Manecke Rd

Brooksville, Fl 34601

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: In order to establish a profitable Retail Sales business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kevin Gonsiewski , CEO

Address 20019 Manecke Rd

Brooksville, Fl 34601

Name and Title: Richard Kenny, COO

Address: 20019 Manecke Rd

Brooksville, Fl 34601

Name and Title: Kevin Gonsiewski , Treasurer

Address 20019 Manecke Rd

Brooksville, Fl 34601

Name and Title: Richard Kenny, CIO

Address: 20019 Manecke Rd

Brooksville, Fl 34601

Name and Title: Richard Kenny, CFO

Address 20019 Manecke Rd

Brooksville, Fl 34601

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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16 JUN 30 PM 12:55

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Kevin Gonsiewski

Address: 20019 Manecke Rd

Brooksville, Fl 34601

ARTICLE VII INCORPORATOR

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

Name: Kevin Gonsiewski

Address: 20019 Manecke Rd

Brooksville, Fl 34601

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

Kevin Gonsiewski


Required Signature/Registered Agent

07 June 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.817.155, F.S.

Kevin Gonsiewski


Required Signature/Incorporator

07 June 2016

Date