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| (Ře | equestor's Name) | | | |
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| (Bu | ısiness Entity Nan | ne) | | |
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W16-060525



September 1, 2016

KEN MIKLES 700 39TH STREET GULF MARATHON, FL 33050

SUBJECT: K & R INC.

Ref. Number: W16000060525

We have received your document for K & R INC. and your check(s) totaling \$70.00. 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.

The document number of the name conflict is L02000024217.

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.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 816A00018624

COVER LETTER

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

| SUBJECT: K&R | INC. | | | |
|--------------------------|--|-------------------------------------|--|--|
| | (PROPOSED CORPORA | ATE NAME – <u>MUST INCL</u> | UDE SUFFIX) | |
| Enclosed are an original | ginal and one (1) copy of the ar | ticles of incorporation and | d 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: | n Mikles Nam) 39th Street Gulf | e (Printed or typed) | | |
| | | Address | | |
| Ma | trathon, FL 33050 | | | |
| _ | City | , State & Zip | | |
| 309 | 5-394-0752 | | | |
| | Daytime 1 | Telephone number | | |
| Ke | nmikles@gmail.com | | | |
| | E-mail address: (to be use | ed 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 corpora | ation shall be: | 's Kar | INC, | | - |
|--|--|----------------|---|----------|--|
| ARTICLE II PRIN | <u>CIPAL OFFICE</u> Principal <u>street</u> address | | Mailing address, if different is: | | |
| 700 39th Street Gulf | | | | | |
| Marathon FL, 33050 | | | | | |
| ARTICLE III PURP The purpose for which | OSE the corporation is organized is: | ine services | | | |
| | | | | எ | ₹ S |
| | | | | 007 | 92 92 92 92 92 93 93 94 94 94 94 94 94 94 94 94 94 94 94 94 |
| | | | - | င်္မ | 25 |
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| | | | | <u> </u> | STA |
| | | | | <u> </u> | |
| | | | | | IONS . |
| | 4L OFFICERS AND/OR DIRECTO E: 700 39th Street Gulf | Name and Title | Ruth Matthews, CEO 700 39th Street Gulf | | |
| Address | Marathon, FL 33050 | Address: | Marathon, FL. 33050 | | |
| | | | | | |
| Name and Title | :: | Name and Title | · | | |
| Address | | | | | |
| | | | | | |
| Name and Title | ··· | Name and Title | | | |
| Address | - | Address: | | | |
| | | | | | |

| Name a | nd Title: | Name and Title: | |
|---|---|--|----|
| Addres | s | Address: | |
| | | | |
| | | | |
| | REGISTERED AGENT | | |
| | Florida street address (P.O. Box NOT acceptable) Ken Mikles |) of the registered agent is: | |
| Name: Address: | 700 39th Street Gulf | — 3. 9. 3. S. A. G. | |
| , | Marathon, FL 33050 | OCT | |
| ARTICLE VII | <u>INCORPORATOR</u> | -3 AM | T. |
| The name and a | ddress of the Incorporator is: | ÖF STATE | |
| Name: | Ken Mikles | | |
| Address: | 700 39th Street Gulf | ζ. | |
| | Marathon, FL. 33050 | | |
| Effective date, if | | | |
| | e inserted in this block does not meet the applicab effective date on the Department of State's record | ole statutory filing requirements, this date will not be listed as ls. | |
| | med as registered agent to accept service of proce am familiar with and accept the appointment as a | | n |
| 1 | Required Signature/Registered Agent | 8.22-2016 Date | |
| I submit this do | Department of State constitutes a third degree fel | re true. I am aware that the false information submitted in long as provided for in s.817.155, F.S. 8 · 22 - 20 6 | a |
| Penn | ured Signature/Incorporator | Data | |