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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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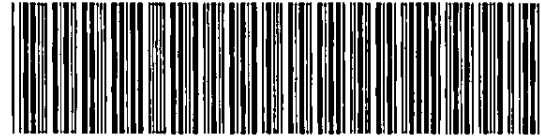
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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08/14/17--01041--035 **78.75

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STATE
FALL ADDRESS FLORIDA

08/15/17

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Ormond Beach, FL 32174
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Facsimile (386) 673-0748
ormondlegal.com

August 10, 2017

VIA FEDERAL EXPRESS

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Articles of Incorporation

Gentlemen:

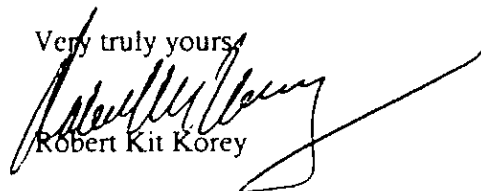
Enclosed please find Articles of Incorporation (with copy) for filing with the Florida Department of State's office for the following company:

T & K ENTERPRISES OF DELAND, INC.

I have enclosed a check in the amount of \$78.75 payable to the Florida Department of State in payment of the filing fees and the designation of registered agent fee totaling \$70.00 and \$8.75 for a certified copy of the Articles. Please return the certified copy to the undersigned.

Should you have any questions regarding these enclosures, please do not hesitate to contact me.

Very truly yours,



Robert Kit Korey

RKK:mww
Enclosures

COVER LETTER

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

SUBJECT: T & K ENTERPRISES OF DELAND, 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: Robert Kit Korey, Esquire

Name (Printed or typed)

Robert Kit Korey, P. A.

Address

595 W. Granada Blvd., Suite A

City, State & Zip

Ormond Beach, FL 32174

Daytime Telephone number

(386) 677-3431

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: T & K ENTERPRISES OF DELAND, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

595 W. Granada Blvd., Suite A

Ormond Beach, FL 32174

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any and all lawful business authorized by the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert Kit Korey, President/Sec & Treasur

Name and Title:

Address 595 W. Granada Blvd., Suite A

Address:

Ormond Beach, FL 32174

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

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TALLAHASSEE, FLORIDA
STATE

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: Robert Kit Korey
Address: 595 W. Granada Blvd., Suite A
Ormond Beach, FL 32174

ARTICLE VII INCORPORATOR

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

Name: Robert Kit Korey
Address: 595 W. Granada Blvd., Suite A
Ormond Beach, FL 32174

FILED
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CLERK OF THE STATE
TALLAHASSEE, FLORIDA

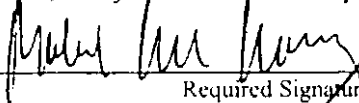
ARTICLE VIII EFFECTIVE DATE:

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 days prior or 90 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

8-11-17

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

8-11-17

Date