

P180000038417

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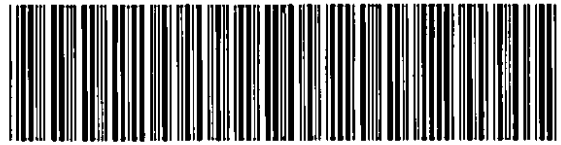
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
ALLAHABAD, INDIA

K. PAGE

APR 30 2018

2018 APR 30 PM 2:02

COVER LETTER

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

SUBJECT: KEVIN LAMIER, 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: M. LAMIER SUBER
Name (Printed or typed)

3920 LEAVE DR.
Address

TALLAHASSEE FL 32309
City, State & Zip

850-893-1411
Daytime Telephone number

M.LAMIERSUBER@COMCAST.NET
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

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be:

Kevin Lanier, Inc.

ARTICLE II

The principal place of business and mailing address of this corporation shall be:

3920 Leane Drive
Tallahassee, FL 32309

ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 Shares

ARTICLE IV

The name and address of the initial registered agent is:

M. Lanier Suber
3920 Leane Drive
Tallahassee, FL 32309

ARTICLE V


The name and street address of the incorporators to these Articles of Incorporation are:

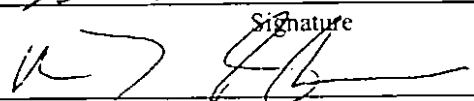
President/Director
M. Lanier Suber
3920 Leane Drive
Tallahassee, FL 32309

Vice President/Director
Kevin T. Suber
39209 Leane Drive
Tallahassee, FL 30309

The undersigned incorporators have executed these Articles of Incorporation this

1st day of May 2018



Signature


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2018 APR 30 PM 2:11
CLERK OF STATE
TALLAHASSEE, FLORIDA

Signature

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

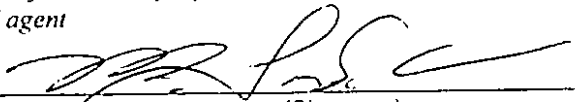
1. The name of the corporation is:

Kevin Lanier, Inc.

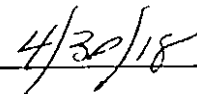
2. The name and address of the registered agent and office is:

M. Lanier Suber
3920 Leane Drive
Tallahassee, FL 32309

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent



(Signature)



(Date)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32327

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TALLAHASSEE, FLORIDA