

P19 000 074 136

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

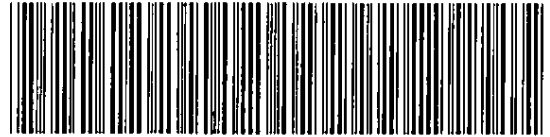
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/02/19--01016--018 **70.00

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19 OCT 21 PM 3:17
PASSPORT

I KINESHA E. COLE will not reinstate
KEC INC

Document number P15000033857

And will file a new filing with the same name.

Kinesha E Cole

SIGN NAME

10-2-2019

DATE

FILED

2019 OCT -2 PM 3:16

CLERK OF COURT
CLERK OF COURT

COVER LETTER

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

SUBJECT: KEC 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: KINESHA E. COLE
Name (Printed or typed)
1025 EAGLE LAKE TRL 404
Address
PORT ORANGE, FL 32129
City, State & Zip
1-816-756-7434
Daytime Telephone number
kinesha.cole@gmail.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: KEC INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

1025 EAGLE LAKE TRL 404

PORT ORANGE, FL 32129

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KINESHA COLE, PRESIDENT

Name and Title: _____

Address 1025 EAGLE LAKE TRL 404

Address: _____

PORT ORANGE, FL 32129

Name and Title: KINESHA COLE, SECRETARY

Name and Title: _____

Address 1025 EAGLE LAKE TRL 404

Address: _____

PORT ORANGE, FL 32129

Name and Title: KINESHA COLE, TREASURER

Name and Title: _____

Address 1025 EAGLE LAKE TRL 404

Address: _____

PORT ORANGE, FL 32129

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2019 OCT -2 PM 3:16
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF ORANGE, FL

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: JP GOLDSMITH FINANCIAL SERVICES INC

Address: 644 W BREVARD ST

TALLAHASSEE, FL 32304

ARTICLE VII INCORPORATOR

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

Name: KINESHA COLE

Address: 1025 EAGLE LAKE TRL 404

PORT ORANGE, FL 32129

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2019 OCT -2 PM 3:16
TALLAHASSEE, FL

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/02/2019 (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

Hellen S.H.
Required Signature/Registered Agent

10/02/2019

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.

Kinesha E. Cole
Required Signature/Incorporator

10/02/2019

Date