

P20000021990

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

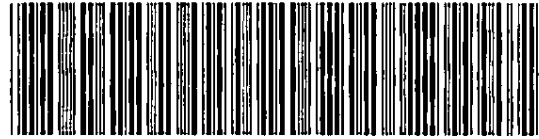
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 FEB 27 PM 1:03

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FEB 27 2020

N.S.

COVER LETTER

**Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

SUBJECT: KMN DISTRIBUTION, INC.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ <u>78.75</u>
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status \$ 8.75

JENNIFER M. TENNEY, ESQ., WOODWARD, PIRES & LOMBARDO, PA

Name (printed or typed)

606 BALD EAGLE DRIVE, SUITE 500

Address

MARCO ISLAND, FL 34145

City, State & Zip

(239)394-5161

Daytime Telephone Number

jtenney@wpl-legal.com

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

CERTIFICATE OF DOMESTICATION

The undersigned, EDWARD A. GRZYWACZ, PRESIDENT,
(Name) (Title)

of KMN DISTRIBUTION, INC. a foreign corporation,
(Corporation Name)

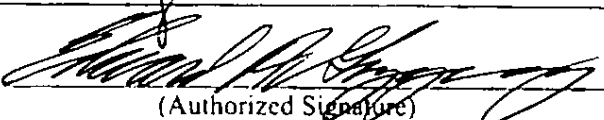
in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was OCTOBER 2, 2012.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was ILLINOIS.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was KMN DISTRIBUTION, INC.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is KMN DISTRIBUTION, INC.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was ILLINOIS.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am PRESIDENT, of KMN DISTRIBUTION, INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done

so this the 6th day of February, 2020


(Authorized Signature)

Filing Fee:	
Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

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DIVISION OF CORPORATIONS
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ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

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SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
20 FEB 27 PM 1:03

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

KMN DISTRIBUTION, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

Mailing Address

350 S. COLLIER BLVD #407

350 S. COLLIER BLVD #407

MARCO ISLAND, FL 34145

MARCO ISLAND, FL 34145

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

CONSULTING, MANUFACTURING, SELLING, MARKETING, MANAGING, AND DISTRIBUTING AND ALL

OTHER LEGAL PURPOSES UNDER FLORIDA LAW

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ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 100

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name	Title/Name
<u>EDWARD A. GRZYWACZ</u>	<u>PRESIDENT</u>
<u>350 S. COLLIER BLVD #407</u>	<u></u>
<u>MARCO ISLAND, FL 34145</u>	<u></u>

Title/Name	Title/Name
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Title/Name	Title/Name
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Title/Name	Title/Name
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ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

EDWARD A. GRZYWACZ

350 S. COLLIER BLVD #407

MARCO ISLAND, FL 34145

ARTICLE VII INCORPORATOR

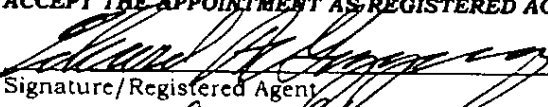
THE NAME AND ADDRESS OF THE INCORPORATOR IS:

EDWARD A. GRZYWACZ

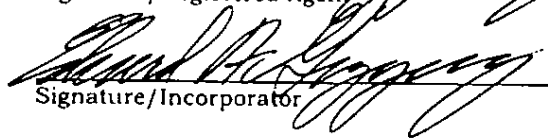
350 S. COLLIER BLVD #407

MARCO ISLAND, FL 34145

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 AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.


Signature/Registered Agent

2-6-20
Date


Signature/Incorporator

2-8-20
Date