

PRO000087101 H200003895513

Florida Department of State

Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LICENSE EXAM SERVICES
Account Number : I20120000042
Phone : (941)685-0955
Fax Number : (866)473-0571

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: **KSWINNEY32@GMAIL.COM****FLORIDA PROFIT/NON PROFIT CORPORATION
K & A HEATING AND AIR, INC.**

Certificate of Status	0
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Page Count	06
Estimated Charge	\$70.00

J. FASON

NOV 12 2020

COVER LETTER

H200003895513

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

SUBJECT: K & A HEATING AND AIR, 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 REQUIREDFROM: **ROBIN O'CONNOR**

Name (Printed or typed)

4713 WEBBER ST

Address

SARASOTA, FL 34232

City, State & Zip

941-685-0955

Daytime Telephone number

KSWINNEY32@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 H200003895513
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: K & A HEATING AND AIR, INC.

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address	Mailing address, if different is:
<u>2830 MALONE DR</u>	<u>2830 MALONE DR</u>
<u>PANAMA CITY, FL 32405</u>	<u>PANAMA CITY, FL 32405</u>

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>PRESIDENT</u>	Name and Title: _____
Address <u>KEVIN SWINNEY</u>	Address: _____
<u>2830 MALONE DR</u>	_____
<u>PANAMA CITY, FL 32405</u>	_____
Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

2020 NOV 10 AM 10:02

H200003895513

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: KEVIN SWINNEYAddress: 2830 MALONE DRPANAMA CITY, FL 32405**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: KEVIN SWINNEYAddress: 2830 MALONE DRPANAMA CITY, FL 324052020 NOV 10 AM 10:02
FILE**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: 01/01/2021. (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*X 
Required Signature/Registered Agent11-10-20
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.*X 
Required Signature/Incorporator11-10-20
Date