

1/30/2021

Division of Corporations

P2100007205
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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

From: Account Name : POMARES ACCOUNTING SOLUTIONS
Account Number : 120190000043
Phone : (786)314-1371
Fax Number : (786)228-0049

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

Email Address: yselltax@yahoo.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
K & A QUALITY CORP**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

2021 FEB -1 PM 1:48
2021 FEB -1 PM 9:17

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COVER LETTER

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

SUBJECT: K&A Quality Corp
(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: K&A Quality Corp
Name (Printed or typed)

1820 W 46th St Apt 415 Apt 415
Address

Hialeah, FL 33012
City, State & Zip

(786) 406- 4465
Daytime Telephone number

yiselltax@yahoo.com
E-mail address: (to be used for future annual report notification)

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NOTE: Please provide the original and one copy of the articles.

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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: K&A Quality Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address

1820 W 46th St Apt 415
HIALEAH, FL 33012

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KENNY DIAZ VILLAR

Address: President
1820 W 46th St Apt 415
Hialeah, FL 33012

Name and Title: ABEL GONZALEZ PARDO

Address: VICE-PRESIDENT
1820 W 46th St Apt 415
Hialeah, FL 33012

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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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: KENNY DIAZ VILLAR
 Address: 1820 W 46th St Apt 415
Hialeah, FL 33012

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: KENNY DIAZ VILLAR
 Address: 1820 W 46th St Apt 415
Hialeah, FL 33012

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/30/2021 (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:

KENNY DIAZ VILLAR 01/30/2021
 Required Signature/Registered Agent 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.

KENNY DIAZ VILLAR 01/30/2021
 Required Signature/Incorporator Date