

P22 0000000106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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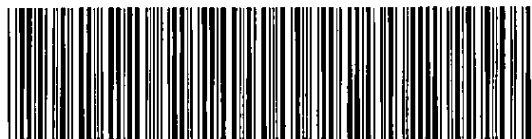
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 JAN -3 PM 4:18
SECRETARY OF STATE
TALLAHASSEE, FL
2022 JAN -3 PM 3:15
TALLAHASSEE, FL

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

KPB Wilton Holdings Corp

Signature _____

Requested by: SETH

12/28/21

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

171 Ponder's Printing • Tallahassee, FL 32301

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
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____ Courier _____

COVER LETTER

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

SUBJECT: KPB Wilton Holdings 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 ☐ \$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: Leighton Brown
Name (Printed or typed)

2117 N Dixie Highway
Address

Wilton Manors, Florida 33305
City, State & Zip

954-566-6898
Daytime Telephone number

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

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

FILED

ARTICLES OF INCORPORATION

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

2022 JAN -3 PM 4: 18

ARTICLE I NAME

The name of the corporation shall be: KPB Wilton Holdings Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

SECRETARY OF STATE
TALLAHASSEE, FL

Mailing address, if different is:

2112 N. Dixie Highway
Wilton Manors, 33305

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To own and lease real estate and for any other legal use

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Leighton Brown - President Name and Title: Shani Brown - Secretary

Address: 1431 NW 70th Ave Address: 2225 Runny Mead Ridge
Plantation, FL 33313 Marietta, GA 30067

Name and Title: Kevin Brown Name and Title: _____

Address: Pleasant Ridge Rd Address: _____
Harrison, NY 10528

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: Leighton Brown

Address: 1431 NW 70th Ave

Plantation, FL 33313

ARTICLE VII INCORPORATOR

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

Name: Leighton Brown

Address: 1431 NW 70th Ave

Plantation, FL 33313

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TALLAHASSEE, FL

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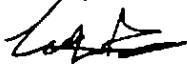
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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:



Required Signature/Registered Agent

12/29/21

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.



Required Signature/Incorporator

12/29/21

Date