

P220000037304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

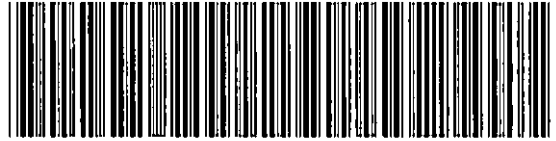
(Business Entity Name)

(Document Number)

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**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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INC

1.

KOSTER COMMUNICATIONS INC.

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

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: Koster Communications Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1317 Edgewater Dr., #6020
Orlando, FL 32804

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

- Online Marketing Concept and Strategy Development
- Social Media Concept and Strategy Development
- Creation and execution of Social Media content and campaigns (organic & Ad campaigns)
- Corporate Identity and Design Development
(Logo Design, Website, Print, Online, Styleguide)

ARTICLE IV SHARES

The number of shares of stock is: 2,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Eva Koester, DPS

Address: 1317 Edgewater Dr.
#6020
Orlando, FL 32804

Name and Title:

Address:

Name and Title: Joerg Ploetzner, DVT

Address: 1317 Edgewater Dr.
#6020
Orlando, FL 32804

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: Registered Agents Inc.
Address: 7901 4th St. N Ste. 300
St. Petersburg, FL 33702

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Amanda J. Beren
Address: 31416 Agoura Rd. Ste. 118
Westlake Village, CA 91361

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

5/16/2022

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

5/16/2022

Date