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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : KCO SERVICES, LLC

Account Number : I20200000018 Phone : (954)744-6605 Fax Number : (833)648-2730

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

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

WALLET POSS	CIDAL AFFICE			
RTICLE II PRINCIPAL OFFICE Principal street address		1	Mailing address, if different i	9.
33 NW 68TH ST				
AMI, FL 33166				
TICLE III PURP				
	the corporation is organized is:			
NY AND ALL LA	WFUL BUSINESS			
				
TICLE IV SHAP	RES			
TICLE IV SHAP number of shares o	RES f stock is: 100			202
TICLE IV SHAP e number of shares o	RES f stock is: 100			2023 J
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Name a	nd Title:	Name and Title:	
Addres	ss	Address:	
	REGISTERED AGENT		
The name and I	Torida street address (P.O. Box NOT acce	ptable) of the registered agent is:	
Name:	DIANA CARDONA		
Address:	8333 NW 68TH ST MIAMI, FL 33166		
	<u>INCORPORATOR</u>		
The name and a	address of the Incorporator is:		
Name:	KCO SERVICES LLC		
	7717 Paddock PL Davle, FI 33328	2023	
			
ARTICLE VIII	EFFECTIVE DATE:	 	
Effective date, i	f other than the date of filing:	(OPTIONAL)	
•	date is listed, the date must be specific a	nd cannot be more than five days prior or 90 days after the	
filing.)		₩.	~
	te inserted in this block does not meet the a effective date on the Department of State's	pplicable statutory filing requirements, this date will not be listed records.	ed as
	familiar with and accept the appointment a	process for the above stated corporation at the place designated its registered agent and agree to act in this capacity	in this
	Albacelow	07/08/2022	
	Required Signature/Registered A		
I submit this do	ocument and affirm that the facts stated h	erein are true. I am aware that the false information submitted	d in a
		ree felony as provided for in s.817.155, F.S.	"
	To		
Required Signal	nure/incorporator		
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