# P98000006785

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

### TRANSMITTAL LETTER

Department of State Division of Corpora	
P.O. Box 6327	• • • • • • • • • • • • • • • • • • •
Tallahassee, FL 323	314
SUBJECT:	S.S. F. INC.  posed corporate name - must include suffix)
Enclosed is an origin	nal and one (1) copy of the articles of incorporation and a check for:
[] \$70.00 [🔀	[ \$ 78.75
Filing Fee	Filing Fee Filing Fee Filing Fee
-	& Certificate & Certified Copy Certified Copy
	000002395301
	-01/14/9801042008
FROM:	Fouad SHami *****78.75 *****78.75
210171	Name (print or type)
	616 N Palmetto Street
•	Address
	Lees burg 7/ 34748
	City, State & Zip
	Daytime Telephone number 2 1998
	p. Hall JAN 2
	· Hall
	<b>L</b> ivie

NOTE: PLEASE PROVIDE THE ORIGINAL AND ONE COPY OF THE ARTICLES



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

January 14, 1998

FOUAD SHAMI 616 N PALMETTO ST LEESBURG, FL 34748

SUBJECT: S.S. & K, INC. Ref. Number: W98000000994

We have received your document for S.S. & K, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

If you have any further questions concerning your document, please call (850) 487-6915.

Pamela Hall Document Specialist

Letter Number: 498A00002250

1/20/98

Dear M? Hall

Osper our conversation, please finol. He Corrected name K.S.S. Inc.

Thank you for your help.

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## FILED

# ARTICLES OF INCORPORATION 2 114

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator(s)(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

K.S.S, Inc

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

616 N Palmetto Street Leesburg, 71 34748

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

6000 Shares

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Found ShamI 616 N Palmetto Street Leesburg, 71 34748

#### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Jouad ShamI 616 N Palmetto Street Leesburg, 71 34748

Na 314 SHAMI 6170 Willow Pointe Circle ORIANDO, 71 32822

Jeffrey Mandunane Karina 600 N BLVD WEST Suite C Leesburg, 71 34748

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this

day of January, 19 98.

Languary, 19 98.

Signature

Signature

Signature

Articles of Incorporation Filing Fee-\$ 35

#### FILED

## CERTIFICATE OF DESIGNATION OF

# REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA ATATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

	2
1.	The name of the corporation is:
	K.S.S, Inc
2.	The name and address of the registered agent and office is:
	FOUAD SHAME
	(Name)
	(P.O. Box not acceptable)
	Leesburg, 71 34748 (City, State, Zip)

Having been named as registered agent and to accept service of process fort he above stated corporation at the place designed in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature)