

P98000039782

TRANSMITTAL LETTER

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

SUBJECT: SKRM INC.

(Proposed corporate name - must include suffix)

000002506430--4
-04/30/98--01043--010
***122.50 ***122.50

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: MARC SCHULTZ
Name (Printed or typed)

12670 34th ST. N. SUITE B 1
Address

CLEARWATER FL 33762
City, State & Zip

813-572-6257
Daytime Telephone number

FILED
98 APR 30 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

APR 30 MAY 1 1998

FILED

98 APR 30 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

SKRM INC.

ARTICLE II PRINCIPAL OFFICE

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

12670 34th ST. N. SUITE B 1
CLEARWATER FL 33762

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS


The name and Florida street address of the initial registered agent are:

SCOTT WINGER
12670 34th ST. N. CLEARWATER FL 33762

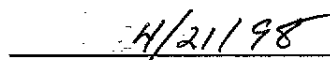
ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

MARC SCHULTZ
12670 34th ST. N. CLEARWATER FL 33762



Signature/Incorporator



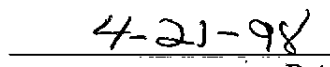
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated 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/Registered Agent



Date