

TRANSMITTAL LETTER

P990000 22716

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

SUBJECT:

K.M.K. Inc.

(Proposed corporate name - must include suffix)

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:

KRISTINE M. KUECHA

Name (Printed or typed)

390 S.E. 28th AVENUE

Address

DOWDANS BEACH FL. 33062

City, State & Zip

(954) 420-6393

Daytime Telephone number

600002797826--5
-03/08/99-01109-013
*****78.75 *****78.75

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 MAR -8 PM 1:51

FILED

B. BROCK MAR 11 1999

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:

K.M.K. Inc.

ARTICLE II PRINCIPAL OFFICE

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

440 S. FEDERAL Hwy SUITE #100
DEERFIELD BEACH, FL 33441

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

KRISTINE M. KUECHA
390 S.E. 28th Ave.
DOWNTOWN Bch, FL 33502

ARTICLE V INCORPORATOR

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

KRISTINE M. KUECHA
390 S.E. 28th Ave.
DOWNTOWN Bch, FL 33502


Signature/Incorporator

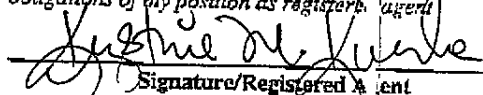
19th FEB. 99

Date

KRISTINE M. KUECHA

(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

19th FEB. 99

Date

KRISTINE M. KUECHA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA