

TRANSMITTAL LETTER

P99000066979

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

SUBJECT:

H K M L Incorporated

(Proposed corporate name - must include suffix)

500002938605--4

-07/22/99--01060--009

*****87.50 *****87.50

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 of Status☐ \$78.75
Filing Fee
& Certified Copy☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status**ADDITIONAL COPY REQUIRED**

FROM:

Harriet A. Lerman

Name (Printed or typed)

2545 NW 13th Court

Address

DeBary Beach, FL 33445

City, State & Zip

561-272-3312

Daytime Telephone number

FILED
99 JUL 22 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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:

H. K. M. L. Incorporated

ARTICLE II PRINCIPAL OFFICE

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

2200 Lake Ida Road
Delray Beach, Fla. 33445

ARTICLE III SHARES

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

1,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Harriet A. Lerman

2200 Lake Ida Road
Delray Beach, Florida 33445

ARTICLE V INCORPORATOR

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

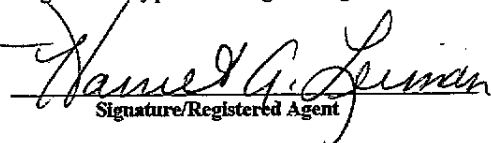
Harriet A. Lerman
2545 N.W. 13th Court
Delray Beach, Fl. 33445-


Signature/Incorporator

7/19/99
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

7/19/99
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 JUL 22 PM 12:56

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