P9900001249/

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

SUBJECT:	KISE Enterprises, Inc	•		<u> </u>
	(Proposed corporate name - must include suffix)			
		*.		4324 11031010 *****78.75
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
☐ \$70. Filing F	- · · · · · · ·	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: Ms. Rafiah Kashmiri Name (Printed or typed)				
	16650 Royal Palm D	rive		3
	Groveland, FL 3 4	736	ALC PLOT	

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

City, State & Zip

Daytime Telephone number

352 39**4**-0781



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:

KISE Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

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

16650 Royal Palm Drive Groveland, FL 34736

ARTICLE III SHARES

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

100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Rafiah Kashmiri_ 16650 Royal Palm Drive Groveland, FL 34736

ARTICLE V INCORPORATOR

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

Rafiah Kashmiri 16650 Royal Palm Drive Groveland, FL 34736

Signature/Incorporator

8.16199

(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

816/99

Date

SO NIGO H O.S.