

P99000087565

Requestor's Name	
Kenneth S. Moskowitz	
830 SE 22nd Avenue, #4	
Pompano Beach, FL 33062	
City/State/Zip	Phone #

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-09/09/99-01054--001
*****70.00 *****70.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
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(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

EFFECTIVE DATE
10-1-99

FILED
99 OCT -5 AM 7:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

no copy
10-5-99
4



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

September 15, 1999

KENNETH S. MOSKOWITZ
830 SE 22ND AVE.
POMPANO BEACH, FL 33062

SUBJECT: T.A.M.S., INC.
Ref. Number: W99000021226

We have received your document for T.A.M.S., INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

The document must have original signatures.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6930.

Carolyn Batten
Document Specialist

Letter Number: 099A00045422

ARTICLES OF INCORPORATION

FILED
99 OCT -5 AM 7:52
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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: Kop Koon Kup, Inc.

EFFECTIVE DATE
10-1-99

ARTICLE II PRINCIPLE OFFICE

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

830 SE 22nd Avenue, #4
Pompano Beach, FL 33062.

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Kenneth S. Moskowitz
830 SE 22nd Avenue, #4
Pompano Beach, FL 33062

ARTICLE V INCORPORATOR

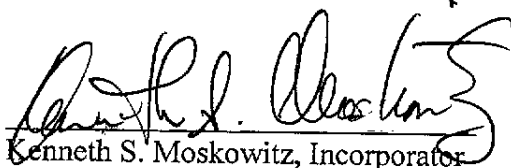
The name and address of the incorporator to these Articles of Incorporation are:

Kenneth S. Moskowitz
830 SE 22nd Avenue, #4
Pompano Beach, FL 33062
305-486-0044 pgr

ARTICLE VI EFFECTIVE DATE OF INCORPORATION

The effective date of incorporation shall be:

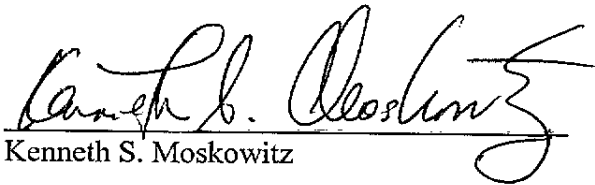
October 1, 1999.


Kenneth S. Moskowitz, Incorporator

10-1-99
Date

ACCEPTANCE OF REGISTERED AGENT

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.


Kenneth S. Moskowitz

10-1-99
Date

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99 OCT -5 AM 7:52
SECRETARY OF STATE
TALLAHASSEE FLORIDA