TRANSMITTAL LETTER

## 099000091039

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

500003011305---5 -10/11/99--01088--015 \*\*\*\*122.50 \*\*\*\*\*\*78.75

SUBJECT:	Kinnaind Kle (Proposed corpor	aring, Inc.	ix)	
Enclosed is an original a	nd one(1) copy of the article	s of incorporation and a c	heck for :	
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	99 001 SECRE
		ADDITIONAL CO	PY REQUIRED	CT I
FROM:	Tony Ki Name (I	nnaind Printed or typed)	· · ·	PH 2:01
. • · · · · -	P.O. Box	1/72 Address	- <del></del>	<b>→</b> · · · · · · · · · · · · · · · · · · ·
-	Geneva, F City	-L 32732 , State & Zip	<del>ne distributio</del> de la	
-	(907) 34 Daytime	79-59/8 Telephone number	·	- 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12

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

10/11/99-

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

ARTICL	EΙ	NAME
**** * * * *		

The name of the corporation shall be:

Kinnaind Klearing, Inc.

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## PRINCIPAL OFFICE

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

P.O. Box 1172 Geneva FL 32732

ARTICLE III SHARES

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

Tenthousand (10,000)

## INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Tony Kinnaind 299 stewart St Geneva, FL 32732

INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Tony Kinnaird 299 Stewart St. Geneva, FC 32732

(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