# P15000088492

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)  Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Elise BOOK GAVE				
AUTHORIZATION BY PHONE TO				
CORRECT V WATE 10/28/15				

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SECRETARY OF STATE

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#### **COVER LETTER**

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

SUBJECT: KreteTe	k Industries, Inc		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	·	\$78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL COPY REQUIRE	
FROM: Ka	ren E. Stedman Nam	e (Printed or typed)	
393	1 RCA Blvd., Suite 3101		
		Address	
Palı	m Beach Gardens, FL 33410		
	City	, State & Zip	
561	-624-0522		
	Daytime	Telephone number	
sted	mancpa@gmail.com		
	E-mail address: (to be use	ed for future annual report	notification)

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



### 15 OCT 23 PM 3: 58

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profile CRETARY OF STATE TAIL LAHASSEE, FLORIDA

name of the corpo					
	NCIPAL OFFICE		No. 11 to 2 days 10 d 100		
Principal street address 200 N Commerce Parkway, Suite 200			Mailing address, if different is:		
ston, FL 33326					
TICLE III PUR	POSE to manufacture to to manufacture to the the corporation is organized is:	facture, sell, buy and	deliver concrete sealers.		
TICLE IV SHA					
number of shares	Of stock is:  IIAL OFFICERS AND/OR DIRECTORS  Inceion Viewani President	Name and Titl	le: Joshua Moore, Vice President		
number of shares  TICLE V INIT  Name and T	of stock is:  **ITAL OFFICERS AND/OR DIRECTORS** itle: **Jessica Firmani, President**	Name and Titl	C		
number of shares  TICLE V INIT  Name and T	of stock is:  IIAL OFFICERS AND/OR DIRECTORS  itle: Jessica Firmani, President  402 Main Street  Nashua, NH 03060  Gary Thomas, Director	Name and Titl Address:	402 Main Street		
number of shares  TICLE V INI  Name and T  Address	of stock is:  IIAL OFFICERS AND/OR DIRECTORS  itle: Jessica Firmani, President  402 Main Street  Nashua, NH 03060  Gary Thomas, Director	Name and Titl Address:	402 Main Street  Nashua, NH 03060		
number of shares  TICLE V INI  Name and T  Address  Name and Ti	of stock is:  IIAL OFFICERS AND/OR DIRECTORS  itle: Jessica Firmani, President  402 Main Street  Nashua, NH 03060  tle: Gary Thomas, Director	Name and Titl Address:  Name and Titl	402 Main Street  Nashua, NH 03060		
number of shares  TICLE V INI  Name and T  Address  Name and Ti	of stock is:  IIAL OFFICERS AND/OR DIRECTORS  itle: Jessica Firmani, President  402 Main Street  Nashua, NH 03060  tle: Gary Thomas, Director  5 Cin-Fre Drive	Name and Titl Address:  Name and Titl	402 Main Street  Nashua, NH 03060		
Name and T Address  Name and T Address	of stock is:  IIAL OFFICERS AND/OR DIRECTORS  itle: Jessica Firmani, President  402 Main Street  Nashua, NH 03060  tle: Gary Thomas, Director  5 Cin-Fre Drive  Hudson, NH 03051	Name and Title Address:  Name and Title Address:	402 Main Street  Nashua, NH 03060		
number of shares  TICLE V INI  Name and T  Address  Name and Ti	of stock is:  IIAL OFFICERS AND/OR DIRECTORS  itle: Jessica Firmani, President  402 Main Street  Nashua, NH 03060  tle: Gary Thomas, Director  5 Cin-Fre Drive  Hudson, NH 03051	Name and Titl Address:  Name and Titl	402 Main Street  Nashua, NH 03060		



## 15 OCT 23 PH 3: 58

Nama	and Title:	Nome and Tisle.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Addre		<del> </del>	
	RECISTERED AGENT Florida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Karen E. Stedman	THE PERSON OF TH	
Address:	3931 RCA Blvd., Suite 3101		
	Palm Beach Gardens, FL 33410		
ARTICLE VII	INCORPORATOR		
The name and	address of the Incorporator is:		
Name:	Jessica Firmani		
Address:	402 Main Street		
	Nashua, NH 03060		:
Effective date,	date is listed, the date must be specific and cannot	. (OPTIONAL	.) ess days prior or 90 business
	ate inserted in this block does not meet the applicable effective date on the Department of State's records.	statutory filing requirement	s, this date will not be listed as
Having been n this certificate,	amed as registered agent to accept service of process I am familiar with and accept the appointment as reg	for the above stated corpo istered agent and agree to	ration at the place designated in act in this capacity
	Karen E Steds	xax	10/14/2015
	Required Signature/Registered Agent		Date
I submit this didocument to the	ocument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the . y as provided for in s.817.1	false information submitted in a 55, F.S.
M	<b>'</b>		10/14/2015
Req	uired Signature/Incorporator		Date

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