

POS000142728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

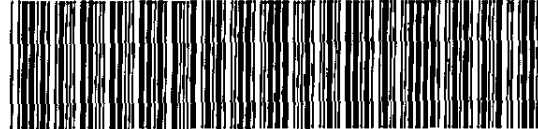
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 OCT 17 AM 9:07
CLERK OF SUPERIOR COURT
STATE OF NEW YORK

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RECEIVED OCT 21 2005

2054770

TRANSMITTAL LETTER

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

SUBJECT: AG Solutions Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Sandra Pearson
Name (Printed or typed)

P.O. Box 8928
Address

Sebring, FL 33872
City, State & Zip

863-699-6018
Daytime Telephone number

FILED
05 OCT 17 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FL 32311

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

AGA Solutions Inc. AGA Solutions Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

*P.O. Box 8928
Sebring, FL 33872*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Decorating Consultant

ARTICLE IV SHARES

The number of shares of stock is: *1000*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

*Sandra Pearson - President
1506 Claredon St.
Lake Placid, FL 33852*

*Laurie Franks - CFO
647 Raccoon Lane
Lorida, FL 33857*

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

*Laurie Franks
647 Raccoon Lane
Lorida, FL 33857*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Sandra Pearson
1506 Claredon St.
Lake Placid, FL 33852*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Laurie Franks

Signature/Registered Agent

8/31/05

Date

Sandra Pearson

Signature/Incorporator

8/31/05

Date

Sandra Pearson

FILED
05 OCT 17 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Laurie Franks
Signature/Registered Agent

8/31/05
Date

Sandra Pearson
Signature/Incorporator

8/31/05
Date

Sandra Pearson

FILED
AUG 31 11 AM '05
STATE OF FLORIDA
TALLAHASSEE, FLORIDA