

P07000115560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

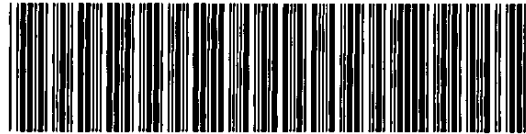
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FILED
2007 OCT 22 PM 4: 06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch OCT 23 2007

COVER LETTER

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

SUBJECT: AAA POWER WINDOW REPAIR SPECIALIST, 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: JAMES J KIESEL
Name (Printed or typed)

982 SUMMIT LAKE DR
Address

WEST POM BEACH FL 33406
City, State & Zip

561 706 9340
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 10, 2007

JAMES J KIESEL
982 SUMMIT LAKE DR
WEST PALM BEACH, FL 33406

SUBJECT: AAA POWER WINDOW REPAIR SPECIALIST, INC.
Ref. Number: W07000050022

RECEIVED
07 OCT 22 AM 11:42
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for AAA POWER WINDOW REPAIR SPECIALIST, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please put the name of the corporation in article I. And complete article VI and article VII, the name of the registered agent and incorporator.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

An effective date may be added to the Articles of Incorporation **if a 2008 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return the corrected 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) 245-6928.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 907A00059444

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: *AAA POWER WINDOW SPECIALIST INC.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is: *982 SUMMIT LAKE DR.
WEST POM BEACH FL 33406.*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *SMALL BUSINESS.
LIGHT AUTO REPAIR.*

ARTICLE IV SHARES

The number of shares of stock is: *200 NO PAR*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): *JAMES J KIESEL.
PRESIDENT
982 SUMMIT LAKE DR.
WEST POM BEACH FL. 33406.*

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 OCT 22 PM 4: 06

FILED

ARTICLE VI REGISTERED AGENT

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

JAMES J KIESEL.
982 SUMMIT LAKE DR.
WEST POM BEACH, FL 33406.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES J KIESEL.
982 SUMMIT LAKE DR.
WEST POM BEACH FL 33406.

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

James J Kiesel
Signature/Registered Agent

10/2/07
Date

James J Kiesel
Signature/Incorporator

10/2/07
Date