

PD8000092728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

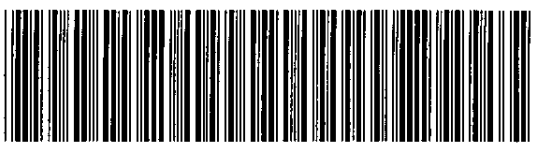
PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



800136845298

10/13/08--01012--012 **87.50

FILED
2008 OCT 14 AM 8:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

[Handwritten signature]
10/14

COVER LETTER

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

SUBJECT: A J O Business Admin, 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: Anibal J Ortiz
Name (Printed or typed)

5720 NW 64th Way
Address

Tamarac, Florida 33321
City, State & Zip

954-600-0289
Daytime Telephone number

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:

A J O Business Admin, Inc

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:
same as above

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Business Administration

ARTICLE IV SHARES

The number of shares of stock is:
100'

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
Anibal J Ortiz
5720 NW 64th Way
Tamarac, Florida 33321
Owner

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Anibal J Ortiz
5720 NW 64th Way
Tamarac, Florida 33321
Owner

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
Anibal J Ortiz
5720 NW 64th Way
Tamarac, Florida 33321
Owner

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

Signature/Registered Agent
[Signature]

Signature/Incorporator/Reg Agent
[Signature]

Date
10-7-08

Date

FILED
2009 OCT 14 AM 8:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA