

P11000018803

(Requestor's Name)

Patricia Bush
P.O. Box 4007

Sanford FL 32772
(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

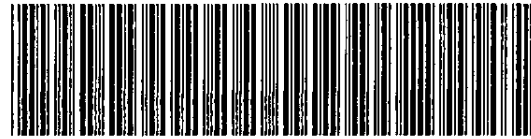
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100193334411

02/07/11--01016--028 **87.50

FILED
2011 FEB 17 PM 4:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1111-71003



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 8, 2011

PATRICIA BUSH
PO BOX 4007
SANFORD, FL 32772

SUBJECT: A-1 FACILITIES SERVICES INC
Ref. Number: W11000007603

We have received your document for A-1 FACILITIES SERVICES 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 911A00003291

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

ARTICLE I NAME A-1 Facilities Services Inc
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
2402 T Key Ave
Sanford FL 32771

Mailing address, if different is:
PO Box 4007
Sanford FL 32772

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Anything legal

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Patricia Bush
Address: Village Lakes Apt.
500 West Airport Blvd.
Sanford, FL 32773

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

FILED
10 FEB 17 AM 4:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Patricia Bush
Address: Village Lakes Apt, 500 W Airport Blvd
Sanford FL 32773

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Patricia Bush
Address: Village Lakes Apt, W. Airport Blvd
Sanford FL 32773

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

Pat Bush
Required Signature/Registered Agent

1/13/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Pat Bush
Required Signature/Incorporator

1/13/11
Date