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(Address)

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PICK-UP WAIT MAIL

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: A TO Z MAINTENANCE & REMOLDING, CORP
(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: GASTON BEAUDOIN
Name (Printed or typed)

300 NW, 2TH STREET
Address

HALLANDALE, FL 33309
City, State & Zip

954-445-4872
Daytime Telephone number

GASTON.BEAUDOIN@COMCAST.NET ✓
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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 A TO Z MAINTENANCE & REMOLDING, CORP
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
300 NW, 2TH STREET
HALLANDALE, FL 33309

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
DO MAINTENANCE AND REMOLDING ON HOUSE

ARTICLE IV SHARES

The number of shares of stock is: 2000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>GASTON BEAUDOIN</u>	Name and Title: _____
Address: <u>300 NW, 2TH STREET</u>	Address: _____
<u>HALLANDALE, FL 33309</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: GASTON BEAUDOIN
Address: 300 NW, 2TH STREET
HALLANDALE, FL 33309

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GASTON BEAUDOIN
Address: 300 NW, 2TH STREET
HALLANDALE, FL 33309

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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



Required Signature/Registered Agent

08-24-2011

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.



Required Signature/Incorporator

09-01-2011
Date