

PI3000009120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

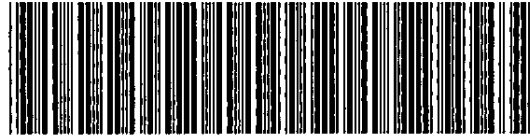
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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-13 JAN 25 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: HAENNICKE NATIONAL SERVICE, 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: MARGARET HAENNICKE

Name (Printed or typed)

50 NW 128 AVE

Address

PLANTATION, FL 33325-2329

City, State & Zip

954-452-3085

Daytime Telephone number

N/A

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: **HAENNICKE NATIONAL SERVICE, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
50 NW 128 AVE
PLANTATION, FL 33325-2329

Mailing address, if different is:
SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **THE CORPORATION IS ORGANIZED FOR THE PURPOSE OF TRANSACTING ANY OR ALL LAWFUL BUSINESS FOR CORPORATIONS ORGANIZED UNDER THE FLORIDA BUSINESS CORPORATION ACT OF THE STATE OF FLORIDA.**

ARTICLE IV SHARES

The number of shares of stock is: **1,000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARGARET HAENNICKE
Address: 50 NW 128 AVE
PLANTATION, FL 33325-2329

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: MARGARET HAENNICKE
Address: 50 NW 128 AVE
PLANTATION, FL 33325-2329

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARGARET HAENNICKE
Address: 50 NW 128 AVE
PLANTATION, FL 33325-2329

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STATE DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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

Margaret Haennicke
Required Signature/Registered Agent

1-18-13
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.

Margaret Haennicke
Required Signature/Incorporator

1-18-13
Date