

P19000067083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

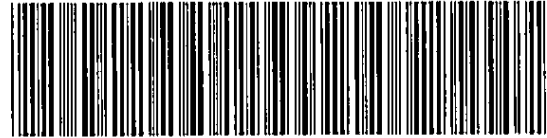
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 AUG 28 PM 4:44

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COVER LETTER

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

SUBJECT: Advantage Air Conditioning 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: Edward Baker
Name (Printed or typed)

16547 Louise Lane
Address

Tallahassee FL, 32310
City, State & Zip

850-815-9181
Daytime Telephone number

baked8159@gmail.com
E-mail address: (to be used for future annual report notification)

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: Advantage Air Conditioning Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address: 116547 Louie Lane
Mailing address, if different is: Same
Tallahassee FL 32310

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: air And all Lawfull business

ARTICLE IV SHARES
The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS "D"
Name and Title: David Edward Baker Name and Title: _____
Address: 116547 Louie Ln Address: _____
Tallahassee FL 32310

Name and Title: John Bernard Roberts III "D" Name and Title: _____
Address: 116547 Louie Ln Address: _____
Tallahassee FL 32310

Name and Title: Ron Durham "D" Name and Title: _____
Address: 116547 Louie Ln. Address: _____
Tallahassee FL 32310

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TALLAHASSEE, FLORIDA

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: David Edward Baker
 Address: 16547 Louie Lane
Tallahassee FL, 32310

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: David Edward Baker
 Address: 16547 Louie Lane
Tallahassee FL, 32310

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____, (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

David Baker

Required Signature/Registered Agent

9/28/19

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.

David Baker

9/28/19