

P11000095791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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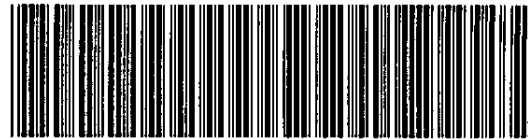
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS  
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11/3/11

## COVER LETTER

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

SUBJECT: ALEXANDRIA SERVICES, 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: SAID M ATTIA  
Name (Printed or typed)

998 US 27  
Address

AVON PARK, FLORIDA 33825  
City, State & Zip

516 233 8221  
Daytime Telephone number

ALEXANDRIAINCI@VERIZON.NET  
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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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: ALEXANDRIA SERVICES, CORP

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

998 US 27  
AVON PARK, FL 33825

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: SERVICES

**ARTICLE IV SHARES**

The number of shares of stock is: TWO HUNDRED

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: SAID M ATTIA

Address: PRESIDENT

998 US 27

AVON PARK, FL 33825

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: SAID M ATTIA

Address: 998 US 27

AVON PARK, FL 33825

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: SAID M ATTIA

Address: 998 US 27

AVON PARK, FL 33825

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

Said Attia

Required Signature/Registered Agent

10/31/11

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.

SAID M ATTIA

Said Attia

Required Signature/Incorporator

10/31/11

Date

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