POOOOOO/77

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

SUBJECT:								
	(Proposed corpo	rate name - must include su	ffix)	 · _ _ ·				
	,	1	00003135 -02/15/000 *****87.50	5315)1063013 *****87.50.				
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	a check for:	_				
☐ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED					
FROM:		BUCHER inted or typed)						
	1317 SE 21ST L A CAPE CORAL, F	ANE ddress L 33990 State & Zip	SECRETARY OF STATE TALLAHASSEE, FLORID	TILED 15 PH 1:25				
		lephone number						

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

88/18

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida
Business Corporation Act, hereby adopts the following Articles of Incorporation.

A	RTIC	TE	7	NAME	
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The name of the corporation shall be:

AAIM BUSINESS SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

SE 21 ST LANE

CAPE CORAL, FL 33990

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500.0

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

ANGELIKA BUCHER

1317 SE 215 LANE

CAPE CORAL, FL 33990

ARTICLE V *INCORPORATOR*

The name and address of the incorporator to these Articles of Incorporation are:

ANGELIKA BUCHER

1317 SE 21ST LANE

CORAL, FL 33990

Date

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent,

Signature/Registered Agent