

P020000013452  
TRANSMITTAL LETTER  
FILED

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

02 FEB -1 PM 1:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: A PLUS MARKETING, inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

500004854525--0  
-02/04/02-01009--002  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is 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: John J. Ardizzone, Sr.  
Name (Printed or typed)  
4831 Charowén Drive  
Address  
Orlando, Fl. 32837  
City, State & Zip  
407-857-1151  
Daytime Telephone number

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

CB 2-6

**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:

*A Plus Marketing, Inc.*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*PO Box 691721  
Orlando, Fl. 32869*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*Real estate brokerage*

**ARTICLE IV SHARES**

The number of shares of stock is:

*100 No par value*

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

*John Joseph Ardizzone, Sr. President  
John Joseph Ardizzone, Sr. V.P.  
John Joseph Ardizzone, Sr. Secretary  
John Joseph Ardizzone, Sr. Treasurer*

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

*John J. Ardizzone, Jr.  
4701 Windsor Ave.  
Orlando, Fl. 32819*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*John Joseph Ardizzone, Sr.  
600 N. Thacker Ave. SUITE D32  
Kissimmee, Fl 34741*

\*\*\*\*\*  
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

*John J. Ardizzone Jr*  
\_\_\_\_\_  
Signature/Registered Agent

*1/31/02*  
\_\_\_\_\_  
Date

*John Joseph Ardizzone Sr*  
\_\_\_\_\_  
Signature/Incorporator

*1/31/02*  
\_\_\_\_\_  
Date

**FILED**

**02 FEB -7 PM 1:04**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**