TRANSMITTAL LETTER

P0 2 0000 26114

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

SUBJECT: __A+MAILING CORP__
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

500005040105--3
-03/04/02--01042--007
*****70.00 *****70.00

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ $70.00   ☐ $78.75   ☐ $78.75   ☐ $87.50
Filing Fee Filing Fee   Filing Fee   Filing Fee,
            & Certificate of Status   & Certified Copy   Certified Copy
                                                         & Certificate of
                                                         Status
                              ADDITIONAL COPY REQUIRED

FROM: __VIOLETA MENDOZA__
                Name (Printed or typed)

__15131 LEEDS LANE__
                Address

__DAVIE, FL 33331__
                City, State & Zip

__(954) 252-0534__
                Daytime Telephone number

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

R CHEESER   MAR 1 1

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+MAILING CORP.

ARTICLE II   PRINCIPAL OFFICE

The principal place of business/mailing address is:

15131 LEEDS LANE, DAVIE FL. 33331

ARTICLE III   PURPOSE

The purpose for which the corporation is organized is:

MAILING SERVICES

ARTICLE IV   SHARES

The number of shares of stock is:

100

ARTICLE V   INITIAL OFFICERS/DIRECTORS (optional)

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

15131 LEEDS LANE, DAVIE FL. 33331

ARTICLE VI   REGISTERED AGENT

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

VIOLETA MENDOZA

15131 LEEDS AVE, DAVIE FL 33331

ARTICLE VII   INCORPORATOR

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

VIOLETA MENDOZA

15131 LEEDS LANE, DAVIE FL. 33331

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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

Violeta Mendoza	2-2-02
Signature/Registered Agent	Date
Violeta Mendoza	2-2-02
Signature/Incorporator	Date