TRISMIT ALLI ER SOLD PARTMENT OF State

P. O. Box 6327 Tallahassee, FL 323		<u> </u>	500007048 -08/12/02 *****70.00	34659 010370U2 *****70.0U
SUBJECT: AS	& G Inc. (PROPOSED CORPORAT	TE NAME MISTING	THUE CLIBELY)	
	(PROPOSED CORPORAT	E NAME – <u>MUST INC</u>	LODE SUFFIX)	_bb 00 v*
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation a	nd a check for:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status COPY REQUIRED	
FROM:	HAROLD W. COFFIELD	Printed or typed)	<u>.</u>	. a - 9- y-
-	2743 ANNISTON ROAD	Address		
-	JACKSONVILLE, FLORIDA 32246 City, State & Zip			
-	(904) 343 3052	elephone number		51
	NOTE: Please provide the or		of the articles.	7. SECON 13 PM



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

August 14, 2002

HAROLD W. COFFIELD 2743 ANNISTON ROAD JACKSONVILLE, FL 32246

SUBJECT: A S & G INC.

Ref. Number: W02000023466

We have received your document for A S & G INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole Corporate Specialist New Filings Section

Letter Number: 902A00048140

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.S. & G. of Jacksonville, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2743 Anniston Rd Jax FL 32246

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: profit

ARTICLE IV SHARES

The number of shares of stock is:

1000 Class A Nonvoting shares at No par value and 100 Cla

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Connie Higgs, Pres.

1209 Eagle Bend Ct.

Jax FL 32226

ARTICLE VI REGISTERED AGENT

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

Harold Coffield 2743 Anniston Rd.

Jax FL 32246

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Harold Coffield 2743 Anniston Rd

Jax FL 32246

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

Signature/Registered Agent

Signature/Incorporator

9/6/62 Date

> <u>C/07</u> Date

O2 SEP 13 PH 4: 38
TALLAHASSEE FLORIDA