

P04000002055

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

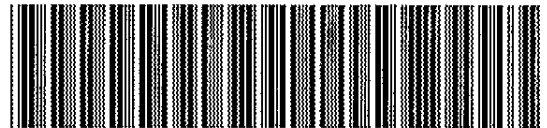
(Document Number)

Certified Copies _____ Certificates of Status _____

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04 JAN -5 PM 12:35

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TRANSMITTAL LETTER

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

SUBJECT: A Plus Development Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: CHARLON Williams
Name (Printed or typed)

P.O. Box 883
Address

Cantonment FL 32533
City, State & Zip

850-968-9570
Daytime Telephone number

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

**ARTICLES OF INCORPORATION
OF
A PLUS DEVELOPMENT, INC.**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the Corporation shall be:

A PLUS DEVELOPMENT, INC.

The principal place of business of this corporation shall be:

*P.O. BOX 883
CANTONMENT, FL 32533*

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is 1,000 with a par value of \$1.00 each

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

**ANTHONY R. WILLIAMS,
PRESIDENT, SECRETARY & DIRECTOR
P.O. BOX 883
CANTONMENT, FL 32533**

**RALPH HETCHLER,
VICE PRESIDENT, TREASURER & DIRECTOR
6343 WYNDOTTE RD
PENSACOLA, FL 36526**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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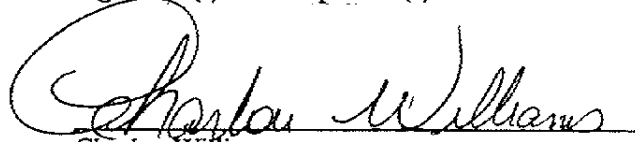
ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is (are):

CHARLOU WILLIAMS
P.O. BOX 883
CANTONMENT, FL 32533

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 3rd day of January, 2004.


Signature (s) of Incorporator(s)


Charlou Williams

STATE OF FLORIDA

COUNTY OF ESCAMBIA

THE FOREGOING instrument was acknowledged and sworn to before me this 3rd day of January, 2004, by CHARLOU WILLIAMS, of A PLUS DEVELOPMENT, INC.


Notary Public

My Commission Expires:



Anthony R. Williams
My Commission DD231338
Expires July 13, 2007


**CERTIFICATE DESIGNATING
REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office / registered agent, in the State of Florida.

1. The name of the corporation is: *A PLUS DEVELOPMENT, INC.*
2. The name and address of the registered agent and office is:

CHARLOU WILLIAMS
2560 S HWY 95A
CANTONMENT, FL 32533

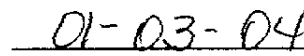

SIGNATURE (CORPORATE OFFICER)


TITLE


DATE

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.


SIGNATURE (REGISTERED AGENT)


DATE