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(Requestor's Name)					
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PICK-UP WAIT MAIL					
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DIVISION OF CONTROLS

04 JUN -9 PM 2: 19

TRANSMITTAL LETTER

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

SUBJECT: AP E	Interprises, Inc.	,		
	(PROPOSED CORPORAT	E NAME - MUST INCL	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	les of incorporation and	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 PPY REQUIRED	
FROM: P	hillind K. Harrison	D		J= + 2 J.1
	Name (Printed or typed)		
	2108 Parkview Ave.			O D
	A	ddress		SEIVISI
	Leesburg, FL 34748			SION -9
	City, S	State & Zip		
	(352) 874-2290		and the second s	T 23
•	Daytime Te	elephone number		FILE SHOULS

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

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:

AP Enterprises, Inc. APH ENTER PRISES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2108 Parkview Ave. Leesburg, FL 34748

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To properly establish identity within the corporate business world and to attain professional status needed.

ARTICLE IV SHARES

The number of shares of stock is:

One Hundred (100) shares of common stock.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Phillind K. Harrison (President/Director/Secretary) 2108 Parkview Ave.

Leesburg, FL 34748

ARTICLE VI REGISTERED AGENT

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

Sharonda Augustus 6 Herald Drive Leesburg, FL 34748

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Phillind K. Harrison 2108 Parkview Ave. Leesburg, FL 34748

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

Almanda Augustus (Sharunda Augustus)
Signature/Registered Agent

5-10 -04

Date

Signature/Incorporator

Date

DIVISION OF CORPORKTION