

PO4000103827

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

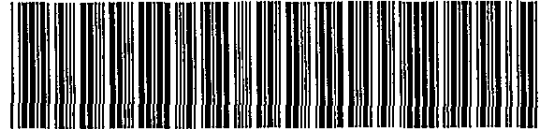
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Richard Riffin GAVE
AUTHORIZATION BY PHONE TO
CORRECT ACT I, VI & VII
DATE 7/13/04
DOC. EXAM TH

Office Use Only



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06/29/04--01040--003 **78.75

FILED
TALLAHASSEE, FLORIDA

04 JUL 12 PM 3:45

FILED

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TH 7/13/04

TRANSMITTAL LETTER

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

SUBJECT: A-Florida State Locksmith Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: BARBARA E EVANS
Name (Printed or typed)

2830 NE 16 Court Pompano Beach
Address

FLORIDA 33062
City, State & Zip

954-983-7620 : 954-274-2484
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 29, 2004

BARBARA E EVANS
2830 NE 16 CT
POMPANO BEACH, FL 33062

SUBJECT: A-OK EMERGENCY LOCK SMITH INC
Ref. Number: W04000025041

We have received your document for A-OK EMERGENCY LOCK SMITH INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please complete the address of the Incorporator.

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) 245-6855.

Tammy Hampton
Document Specialist
New Filings Section

Letter Number: 104A00042484

RECEIVED

04 JUL 12 PM 12:12

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-Florida State LockSmith Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2830 NE 16TH CT
POMPANO BEACH FL 33062

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To work in Florida.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares PA-VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Barbara EVANS - CEO
Richard RIFFIN - CFO

ARTICLE VI REGISTERED AGENT

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

Barbara Evans
2830 NE 16th CT
Pompano Beach, FL 33062

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Barbara Evans
2830 NE 16 CT
Pompano Beach 33062

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

Barbara E Evans
Signature/Registered Agent

JUNE 26-2004
Date

Barbara E Evans
Signature/Incorporator

JUNE 26-2004
Date