P04000167945

(Requestor's Name)				
(Address)				
	rec)			
(Address)				
(City/State/Zip/Phone #)				
	_	ومسنو		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
•	·	,		
(Document Number)				
(Docui	nencivamoer)			
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Opecial metadolore of imig Officer.				
	•			

Office Use Only



600043270726

12/13/04--01030--016 **78.75

04 DEC 13 PH 1:39

F 104

TRANSMITTAL LETTER

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

BJECT: AFTER	ME INC		
*	(PROPOSED CORPORA	TE NAME – MUSTINGE	UDESUEE(X)
closed are an orig	inal and one (1) copy of the art	icles of incorporation and	l 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
) DDITTO 141 GG	Status
		ADDITIONAL CO	PY REQUIRED
EDOM. AN	DREW H MOORE		
FROM: TWO	Name	(Printed or typed)	
:	5153 OLD ASHWOOD		
•		Address	
	SARASOTA , FL 34233		
		, State & Zip	
9	941-993-2338		
-	Dourtime	alanhona numbar	

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:

AFTER ME INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 165 E. VENICE AVE, VENICE, FL 34285

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: PROFIT

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ANDREW H. MOORE 5153 OLD ASHWOOD DR SARASOTA,FL 34233 PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

ANDREW H. MOORE 5153 OLD ASHWOOD DR SARASOTA,FL 34233

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ANDREW H. MOORE 5153 OLD ASHWOOD DR SARASOTA, FL 34233

****************	**********
Having been named as registered agent to accept service of process for the abo certificate, I am familiar with and accept the appointment as registered agent and	we stated corporation at the place designated in this d agree to act in this capacity
Tool of Men	12/08/04
Signature/Registered Agent	Date
Role of Mem	12/08/04
Signature/Incorporator	Date

or ner o put 1.39