POS000048136

| (Requestor | 's Name) |
|----------------------------------|-----------------------|
| (Address) | |
| (Address) | |
| (City/State/ | Zip/Phone #) |
| PICK-UP | WAIT MAIL |
| (Business I | Entity Name) |
| (Document | Number) |
| Certified Copies C | ertificates of Status |
| Special Instructions to Filing O | fficer: |
| | |
| | |
| | |
| | |
| Office Use Only | |



300048859573

U3/31/05--U1044--U2U **78.75

OS MAR 31 PH 2: 37
DIVISION OF CURPURATION

OS MAP 31 PH 2: 58

TRANSMITTAL LETTER

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

SUBJECT: AAA McGUFFS PROFESSIONAL CIMOUCHE, ZNC
(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

& Certificate of

□ \$78.75

Filing Fee

& Certified Copy

& Certificate of Status

COPY REQUIRED

LAURANCE McGAIFF

Name (Printed or typed)

1839B S. MONROS STEET

TALL AHASSES, FL 3230/
City, State & Lip

85-508-6118 of 352-258-1050

Daytime Telephone number

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)

05 MAR 31 PH 2:50

SECRETARY OF STATE TALLAHASSEF, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

AAA MCGAIFFS PROFOSSIONAL CIMOUSING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1839B S. MONDOG STREET TALLAHASKED, FC 32301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LIKERY SELUICE

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

LAURANCE MC GRIFF, PRECIDENT

1839B S. MON LOG STREET

TALCAHASSED, FC 3230/

REGISTERED AGENT

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

LAURANCE MC GARA 1839RS. MONKOE STREET 1839R S.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LAURINCE UL GUPP

1839B S. MONROE STREET TALCAMASSEE, FC 32301

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