

P05000122142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

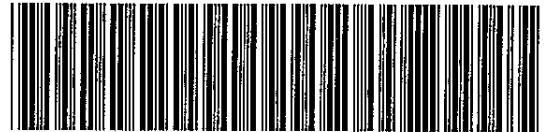
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200058629232

08/22/05--01000 - 005 \*\*78.75

FILED  
05 SEP -6 AM 10:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9/7/05  
BWL

W05-40278

## TRANSMITTAL LETTER

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

**SUBJECT:** Assured Services, 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:** Frank Kneiser

Name (Printed or typed)

530 100th Avenue, North

Address

Naples, Florida 34108

City, State & Zip

239-298-2233

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

August 25, 2005

FRANK KNEISER  
530 100TH AVE. N.  
NAPLES, FL 34108

SUBJECT: ASSURED SERVICES, INC.  
Ref. Number: W05000040278

We have received your document for ASSURED SERVICES, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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) 245-6840.

Bruce W Kitchens  
Document Specialist  
New Filings Section

Letter Number: 705A00053939

**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 *Rest Assured Services, Inc.*

**Article II Principal Office**

The principal place of business/mailling address is 530 100<sup>th</sup> Avenue, North, Naples, Florida 34108

**Article III Purpose**

The purpose for which the corporation is organized is to provide a variety of services to condominium owners and homeowners as well as other consumers as appropriate.

**Article IV Shares**

The number of shares of stock is one hundred (100).

**Article V Initial Officers and/or Directors**

Frank Kneiser, President  
530 100<sup>th</sup> Avenue, North  
Naples, Florida 34108

**Article VI Registered Agent**

The name and Florida street address of the registered agent is:  
Frank Kneiser, President  
530 100<sup>th</sup> Avenue, North  
Naples, Florida 34108

**Article VII Incorporator**

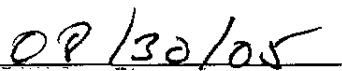
The name and address of the incorporator is:  
Frank Kneiser, President  
530 100<sup>th</sup> Avenue, North  
Naples, Florida 34108

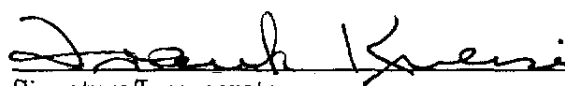
FILED  
05 SEP -6 AM 10:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

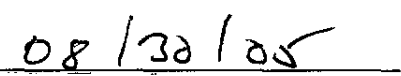
\*\*\*\*\*

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.

  
Signature/Registered Agent

  
Date

  
Signature/Incorporator

  
Date