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(Re	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bus	siness Entity Nam	ie)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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Office Use Only



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WOS. 42790

COVER LETTER

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

SUBJECT:	A Sign from	Above In	C ·
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX)</u>
Enclosed are an orig	ginal and one (1) copy of the arti	cles 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:	Jennifer Kola Name 5206 S.W. 9154		
	Cooper City		

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 14, 2005

JENNIFER KOLAKOWSKI 5206 SW 91ST TERR COOPER CITY, FL 33328

SUBJECT: A SIGN FROM ABOVE Ref. Number: W05000042790

We have received your document for A SIGN FROM ABOVE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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

The registered agent must sign accepting the designation.

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) 245-6931.

Becky McKnight Document Specialist New Filings Section

Letter Number: 505A00056877

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 sign from Above Inc.	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is: 5206 S.w. 915+ Terr.	
Cooper City, FL. 33328	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	5 010
Billboard signs a poster board	J Ctc.
ARTICLE IV SHARES	
The number of shares of stock is: 100	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s): Jennifer Kolgkowski - Presi	dent
5206 S.W. 9/St. Terr.	
copper city, FI 33328	
	9
	OS SEP
The name and Florida street address (P.O. Poy NOT secentable) of the registered execution	8 3
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Jennifer Kolokowski	· · · · · · · · · · · · · · · · · · ·
	AM 10: 29
5206 SW 91St. Terr. Cooper City, Fl. 33328	# 2 Alic
ARTICLE VII INCORPORATOR	9 2
The name and address of the Incorporator is:	
Jennifer Kolakowski	
5206 SW91St. Terr. Coopercity, #1-33328	
Coopercity, #1-33328	
***************	****
Having been named as registered agent to accept service of process for the above stated corporation at the place certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	designated in this
Jennfe Kalehan 9-19-05	
Signature/Registered Agent Date	
Jennos Kalukun 9-19-05	
Signature/Incorporator Date	