

P06000003575

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

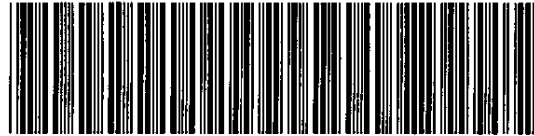
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600062918056

01/06/06--01032--021 \*\*87.50

FILED

06 JAN -6 AM 9:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: American Maintenance 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: Greg KANE  
American Maintenance Services Inc  
Name (Printed or typed)

10648 SW 156 Place  
Address

Dunnellon FL 34432  
City, State & Zip

352 561 6341  
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)

FILED

06 JAN -6 AM 9:16

**ARTICLE I NAME**

The name of the corporation shall be:

American Maintenance Services Inc

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

10648 SW 156 Place Dunnellon Fl 34432

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose is to engage in any activities or  
Business permitted under the laws of the  
United States and Florida

**ARTICLE IV SHARES**

The number of shares of stock is:

The corporation is Authorized to issue 1000 shares  
all in one class

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Greg Kane President  
10648 SW 156 Place Dunnellon Fla 34432  
352 861 6341

**ARTICLE VI REGISTERED AGENT**

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

Greg Kane  
10648 SW 156 Place Dunnellon Fla  
34432

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

President Greg Kane  
10648 SW 156 PL  
Dunnellon FLA 34432

\*\*\*\*\*  
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