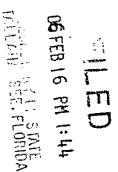
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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use On	ly £



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COVER LETTER

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

SUBJECT: AUS AND MAINTENQUE TWO.

(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 \$78.75
Filing Fee Filing Fee & Certificate of Status

\$287.50
Filing Fee Filing Fee, & Certified Copy & Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: MUSTIN M. SANDERS

Name (Printed or typed)

10211 Pines BIVD # 185

Address

Penbroke Pines FL 33026

City, State & Zip

954-558-7113

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. (Prof.	in) Report of the second of th
ARTICLE I NAME The name of the corporation shall be: AUSIAND MAINTENANCE IN	FEB 16 PM 1:44 LUCIANS SEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 10211 PINES BLUD. PEMBROKE P # 185 ARTICLE III PURPOSE The purpose for which the corporation is organized is: MAINTENANCE PROFIT	•
ARTICLE IV SHARES The number of shares of stock is: (O)	
ARTICLE V INITIAL OFFICERS AND/OR DIRECT List name(s), address(es) and specific title(s): NUSTIN M. SANDERS 10860 NW 3. PRESIDENT	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable NUSTIN WINDERS	e) of the registered agent is:
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	Le FINES, FL 33026
AUSTIN M. SAN DERS 10560 NW 3RO ST Pemblike ***********************************	**************************************
Signature/Registered Agent	Date

2-5-06 Date

Signature/Incorporator REGISTERED AGENT AUSTIN M. SANDERS