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DIVISIONE FARY OF SAME

COVER LETTER

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

SUBJECT: A and S 4 Inc	
(PROPOSED CO)	rporate name – <u>Must include Suffix</u>)
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 Statu	S78.75 S87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Bansikumar A Brahmbl	Name (Printed or typed)
289 NW Burk Ave	Address
Lake City, FL 32055	City, State & Zip
<u> </u>	367 aytime Tolephono number

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

ARTICLE II	PRINCIPAL OFFICE			
The principal place	e of business/mailing address is:			
289 NW Burk A Lake City, Florid				
	PURPOSE which the corporation is organized is:			
To operate bus	iness in the state of Florida according to	the States Laws.		
ARTICLE IV The number of sh 1000	SHARES ares of stock is:		06 OCT 17 PM	Chalsich of
• • •	INITIAL OFFICERS AND/OR DIRE	CTORS		CKPUT
289 NW Burk A Lake City, Flori			1:30	三
ARTICLE VI The name and FI Bansikumar A B	REGISTERED AGENT orida street address (P.O. Box NOT accepts Brahmbhatt	able) of the registered agent is:		
289 NW Burk A Lake City, Florid	_			
ARTICLE VII	INCORPORATOR Idress of the Incorporator is: Brahmbhatt ve			
*****	************	************	非常學家本	**
	as registered agent to accept service of process for the liter with and accept the appointment as registered age		iated in	this
Ble	AS	10-11-16 Date	_	
	ne/Registered Agent		-	
	NUS.	10-11-6		

Date

ARTICLES OF INCORPORATION

The name of the corporation shall be:

ARTICLE I

A and S 4, Inc.

Signature/Incorporator

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)