

PO6000132524

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

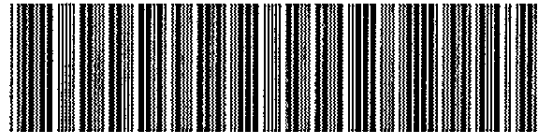
(Business Entity Name)

(Document Number)

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03/23/06--01023--003 \*\*78.75

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 OCT 16 PM 2:42

VH

006-42964

## TRANSMITTAL LETTER

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

SUBJECT: Anthony's Enterprises 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Anthony Wharwood  
Name (Printed or typed)  
8960 NW 24<sup>th</sup> Place  
Address  
Sunrise, FL 33322  
City, State & Zip  
Bus. 954-746-5640  
Cell 954-649-4655  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 2, 2006

ANTHONY WHARWOOD  
8960 NW 24TH PLACE  
SUNRISE, FL 33322

SUBJECT: ANTHONY'S ENTERPRISES INC.  
Ref. Number: W06000042964

We have received your document for ANTHONY'S ENTERPRISES 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.**

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

You must list at least one incorporator with a complete business street address.

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) 245-6962.

Valerie Herring  
Document Specialist  
New Filing Section

Letter Number: 306A00058229

**ARTICLES OF INCORPORATION**

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

FILED  
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DIVISION OF CORPORATIONS

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**ARTICLE I NAME**

The name of the corporation shall be:

Anthony's Enterprises ACE Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

8960 NW 24<sup>th</sup> Place  
Sunrise, Fl. 33322

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Interior and Exterior Remodeling

**ARTICLE IV SHARES**

The number of shares of stock is:

10

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

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

Anthony Wharwood — President  
8901 NW 24<sup>th</sup> Place  
Sunrise, Fl 33322

**ARTICLE VI REGISTERED AGENT**

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

Anthony Wharwood  
8901 NW 24<sup>th</sup> Place  
Sunrise, FL. 33322

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Anthony Wharwood  
8901 NW 24<sup>th</sup> Place  
Sunrise, FL. 33322

\*\*\*\*\*

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 & Incorporator

09/26/06  
Date