

PD6000145532

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

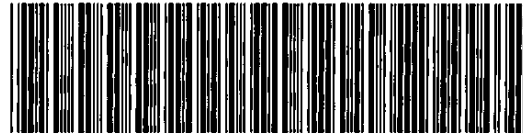
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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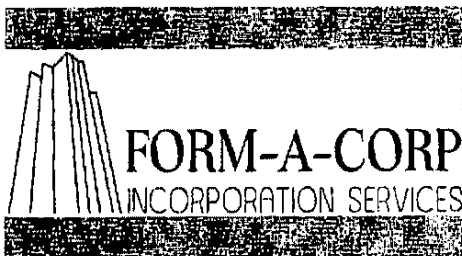


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09/18/06--01018--012 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 NOV 20 AM 8:33

VH
11/16/06



FORM-A-CORP, INC.
4400 PGA BLVD., SUITE 900
Palm Beach Gardens, FL 33410

Toll-Free/US: 800.430.1516
Worldwide: 561.249.4348
Facsimile: 800.275.4402

Web Site: www.form-a-corp.com
Email: fackir@form-a-corp.com

FAX COVERSHEET

Date:	November 20, 2006	From:	Daniel Levy
To:	Florida Corporate Division	To Fax:	850-245-8804
Attn:	Valerie Herring	Pages:	3 , including fax coversheet
Re:	AUSTIN'S BUSINESS SERVICES INC. cc:		

☐ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

● **Confidentiality Note:** The documents accompanying this facsimile contain information which may be confidential. The information is intended only for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or the taking of any action in reliance on the contents of this facsimile is solely prohibited, and that the documents should be returned to Form-A-Corp immediately. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the return of the original documents to us at no cost to you.

Message:

THANK YOU VALERIE!!

Offices: California – Delaware – Florida – Nevada – New York – Wyoming

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COVER LETTER

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

SUBJECT: AUSTIN'S BUSINESS 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: HENDERSON MARLENE
Name (Printed or typed)

SPARROW DR. 614
126 SPARROW DR.
Address

ROYAL PALM BEACH FLA. 33411
City, State & Zip

561-602-9516
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 20, 2006

MARLENE HENDERSON ****3RD ML****

126 SPARROW DR, APT 6-A
ROYAL PALM BEACH, FL 33411

SUBJECT: AUSTIN'S BUSINESS SERVICES INC.
Ref. Number: W06000040941

We have received your document for AUSTIN'S BUSINESS SERVICES 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 document must state the number of shares of authorized stock.

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.)

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: 106A00055845

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be:

Austin's Business Services Inc.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

10259 NE 2nd Terrace
Okeechobee, FL 34972

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Vending Machine Sales

ARTICLE IV SHARES

The number of shares of stock is:

1000 Common Shares, \$0.01 Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

(D, P, VP, T, S) Marlene Henderson
126 Sparrow Drive, Apt. 6-A
Royal Palm Beach, FL 33411

ARTICLE VI REGISTERED AGENT

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

Form-A-Corp, Inc.
4400 PGA Blvd, Suite 900
Palm Beach Gardens, FL 33410

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Daniel Levy
4400 PGA Blvd, Suite 900
Palm Beach Gardens, FL 33410

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

By:  (DANIEL LEVY, VP)
Signature/Registered Agent

11/20/2006

Date


Signature/Incorporator

11/20/2006

Date