PO6000156974

(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



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COVER LETTER

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

SUBJECT: A	M-1 Sarvice II	- h C .	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00	\$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	
			& Certificate of
		ADDITIONAL CO	Status
		ADDITIONAL CO	DPY KEQUIKED
EDOM:	Adding To		
FROM	ANUAR James	(Printed or typed)	
	POBOX 112259		
		Address	
	/ -/	_	
	Noples FC	34/08	
	' / City	, State & Zip	
	0.0 0.0 -	a 7	
	239-289-70. Daytime	ر ک Telephone number	

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



December 11, 2006

ANUAR JAMETTE PO BOX 112259 NAPLES, FL 34108

SUBJECT: AM-1 SERVICE INC. Ref. Number: W06000051480

We have received your document for AM-1 SERVICE INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return 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 850-245-6052.

Letter Number: 906A00068417

Paisley A Alford New Filing Section Division of Corporations

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	
The name of the corporation shall be:	
·	
AM-1 Service Inc	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
100 Box 112259 7429 3 Naples FL. 34108 Ft My	Sea Island RD 5 ,Fl. 33967
Naples FL. 34108 FLM	FL.38967
ARTICLE III PURPOSE	s),
The purpose for which the corporation is organized is:	
	30.0
Water Cond. / pump Repair	200 Since 1
ARTICLE IV SHARES	PO NO
The number of shares of stock is:	727 7
1000	The state of the s
	ED AH IO: 42 OF STATE F, FLORIDA
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	ORIE CAT
List name(s), address(es) and specific title(s):	以中で
ANUar Jamette	
POBOX 112259	
Naples _ FC 34/08	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the Annar Jame He Scal RD	registered agent is:
Ft Myers , FC 39967	
ARTICLE VII INCORPORATOR	
.The <u>name and address</u> of the Incorporator is:	
ANUAR Jamette	
7429 Sea Island RD.	
Ft Muzzs, FC. 33967	
*****	i来来来来来来来来来来来来来来来来来来来来来来来来来来来来来来来来 tad comparation at the place decimated in the
Having been named as registered agent to accept service of process for the above star certificate, I am familiar with and accept the appointment as registered agent and agree	e to act in this capacity
	11-21-06
Signature/Registered Agent	Date
	11-21-06 Date 11-21-06
Signature/Incorporator:	Date
pigitura monthamm.	45 40.4