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·
(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zip/Pflone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(,
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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2007 JAN 22 PM 3: 37
SECRETARY OF STATE
TAIL ANASSES FOR DRIVE

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 A.J. SALES REP., Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$87.50 Filing Fee, \$70.00 \$78.75 \$78.75 Filing Fee Filing Fee Filing Fee & Certified Copy & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED 3500 Mystic Pointe Dr. #404

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

Aventura FC 33/80 City, State & Zip

305-332-3/86
Daytime Telephone number

ADTICLES OF INCORDOD ATION	
ARTICLES OF. INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	wa.
ARTICLE I NAME The name of the companion shall be:	
The name of the corporation shall be:	2007 JAN 22 PM 3: 37
A.J. Sales Rep., Inc.	
ARTICLE II PRINCIPAL OFFICE	SECRETARY OF STATE TALLAHASSEE, FLORIDA
The principal place of business/mailing address is:	
169 E. Flagler Street., Suite 1620	0
Miami, FL 33/31	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	•
Furniture Sales.	
•	•
ARTICLE IV SHARES	
The number of shares of stock is:	
,00	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
6 (1) Advanced (Tree time(s):	Youl Wagner (Presider 3500 Mystic Pointe Dr
@ Elisa Wagner (Treasurer/Secretary) (2) 3500 Mystic Pointe Dr. #3802	3500 Mistic Pointe Dr
Auntura, Fr 33/80	Auctora, FL 33/80
	•
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the re	egistered agent is:
Elisa Wigner 3500 Mystic Pointe D. #3802	
Averture FL 33/80	·
,	·
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Daniel Wigner, Esq. 3500 Mythic Pointe Dr. # 404	
Avatura, FL 33/50	
*******************	*********
Having been named as registered agent to accept service of process for the above stated certificate, I am familiar with and accept the appointment as registered agent and agree to	l corporation at the place designated in this o act in this capacity
llisa Wagne	1/20/67
Signature/Registered Agent	1/20/0/
Signature/Registered Agent	/ Date /
Si di A	1/20/07
Signature/Indorporator \	/ Date/