

P07000051367

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

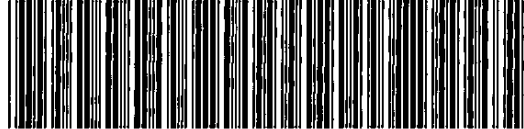
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4/27/07  
AS

## COVER LETTER

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

SUBJECT: A, B & J Groves 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: Lori Ann HERMANN  
Name (Printed or typed)

6323 LAKEVILLE RD.  
Address

ORLANDO, FLORIDA 32818  
City, State & Zip

407-290-6884  
Daytime Telephone number

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

**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:

A, B And J Groves Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

6323 LAkeville RD.  
Orlando, Fl 32818

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful Business

**ARTICLE IV SHARES**

The number of shares of stock is:

2

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

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

Lori Ann Herrmann, President  
Jean-marc P. Stark, Vice President  
6323 LAkeville RD.  
Orlando, Fl 32818

**ARTICLE VI REGISTERED AGENT**

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

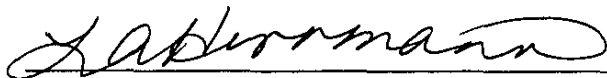
Lori Ann Herrmann  
6323 LAkeville RD.  
Orlando, Fl 32818

**ARTICLE VII INCORPORATOR**

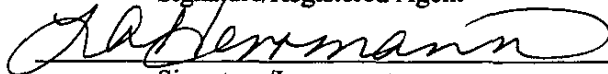
The name and address of the Incorporator is:

Lori Ann Herrmann  
6323 LAkeville RD.  
Orlando, Fl 32818

\*\*\*\*\*  
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



Signature/Incorporator

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07 APR 26 PM 3:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4.15.07

Date

4.15.07

Date