

PO7000/23257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

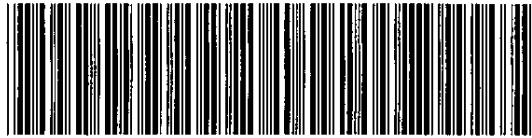
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
11/14

COVER LETTER

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

SUBJECT: AARONS ONSITE SERVICE SOLUTIONS INC SW Florida
(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: AARONS ONSITE SERVICE SOLUTIONS INC.
Name (Printed or typed)

2710 DEL PRADO BLVD. SUITE 2166
Address

CAPE CORAL FLORIDA 33904
City, State & Zip

239-530-0318
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: *AARONS ONSITE SERVICE SOLUTIONS INC. SW FLORIDA*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*2710 DEL PRADO BLVD. SUITE 2166
CAPE CORAL FL 33904*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR ANY LAWFUL PURPOSE FOR PROFIT.

ARTICLE IV SHARES

The number of shares of stock is:

100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARK WHITE JR. V.P.

JOHN BURLEY

DIRECTOR

*13650 FIDDLESTICKS BLVD.
FORT MYERS FL 33913.*

*2710 DEPRADO BLVD. #2166.
CAPE CORAL FLORIDA 33904*

ARTICLE VI REGISTERED AGENT

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

*MARK WHITE JR. 13650 FIDDLE STICKS BLVD.
FORT MYERS FL 33913.*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOHN BURLEY

*2710 DELPRADO BLVD. SUITE 2166
CAPE CORAL FLORIDA 33904*

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]

Signature/Registered Agent

Date

[Signature]

Signature/Incorporator

10-1-07.

Date

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07 NOV 13 PM 3:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA