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\*H* 

## **COVER LETTER**

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

SUBJECT:	ACILLA INVESTM	ents Inc.	
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	Andy Jacobane	(Printed or typed)	
-	Monticello, FL city,	32344 State & Zip	
-	Daytime Te	elephone 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 <u>NAME</u>

The name of the corporation shall be:

Aucilla Investments, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

290 Kaptain Dr., Monticello, FL 32344

## ARTICLE III \_\_PURPOSE

The purpose for which the corporation is organized is:

Ice vending

The number of shares of stock is: 10

## ARTICLE V \_\_ INITIAL OFFICERS AND/OR DIRECTORS

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

ANDREW JAMP PRESIDENT/CEO 290 KAPTAIN DR

MONTHER FC 32344

240 KAPTAIN DR.

Mouncers, Fe 32344

FILED 07 DEC -6 AM 10: 25 SECNE TARY OF STATE TALLAHASSEE, FLORIDA

AKTICHE VI KEGISTERED AGENT
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:
MAGAN JAAP
290 Kaptain Dr., Monticello, FL 32344
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is:
And Jaap
And Jaap 290 haptain_Dr.
Monticolb FC 32344
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this ertificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
Magen Low
\$ignature/Registered Agent / Date
12/5/07
Signature/Incorporator Date

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SECONDIANS OF STATE