7000131780

(Requestor's Name) .		
(Address)	700112567017	
(Address)		
. (City/State/Zip/Phone #)		
PICK-UP WAIT MAIL	12/03/07~-01039003 **70	
(Business Entity Name)		
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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 4, 2007

EINER AGUDELO 7956 W 29LN APT 101 HIALEAH, FL 33018

SUBJECT: AC WOOD SERVICES Ref. Number: W07000058849

We have received your document for AC WOOD SERVICES and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2008 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the corrected original and one copy of 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) 245-6955.

Suzanne Hawkes Regulatory Specialist II New Filing Section

Letter Number: 407A00068435

COVER LETTER

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

SUBJECT: AC W	Vood Services, Inc.		
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
		·	
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 PY REQUIRED
_{FROM:} Ei	ner Agudelo		
	Name ((Printed or typed)	
	7956 W. 29 Ln.		
•	A	ddress	
	Hialeah, FL 33018		
	City, S	State & Zip	<u>—</u>
_	786.541.5125		
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:

AC Wood Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 7956 W. 29 Ln. Hialeah, FL 33018

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To sell services for playground manufacturers such as installation and refurbishing.

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Mr. Einer Agudelo: President & CEO

7956 W. 29 Ln. Hialeah, FL 33018



Signature/Incorporator

NOTARY PUBLIC-STATE OF FLORIDA Antonio E. Olaechea Commission # DD481043 Expires: OCT. 12, 2009 Bonded Thru Adamtic Bonding Go; ific:

Date

STATE OF FLORIDA - COUNTY OF MIAMI - DADE

The foregoing instrument was acknowledged before me this 29 day of NOV , 2007, by Enter E & BUDELO

Notary Signature

Notary Name Printed Antonio E Ola Echiosa

Personally Known or 1D produced Foresawally Known.