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(Requestor's Name)				
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PICK-UP WAIT MAIL				
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2008 MAR 17 AH 8: 48 SECRETARY OF STATE ALLAHASSEE, FLORID.

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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 6, 2008

ANDREA T. CLEET **4303 AVIAN AVENUE** FORT MYERS, FL 33916

SUBJECT: ADM PROPERTY SERVICES

Ref. Number: W08000011880

We have received your document for ADM PROPERTY 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.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6993.

Annie Hall Regulatory Specialist II New Filing Section

Letter Number: 008A00014061

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 2000 MAR 17 AM 8: 48
SECRETARY OF STATE
ANASSEE, FLORIDA

SUBJECT:	UBJECT: ADM PROPERTY SERVICES, CORP			
**************************************	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the arti	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: A	ndrea T. Cleet	(Printed or typed)		
	4303 Avian Ave	· · · ·		
	FORT MYERS,	FL 33916 State & Zip		
<u>!</u>	239-939-0809			
	Daytime 1	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 NAME

The name of the corporation shall be:

ADM Property Services Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4303 AVIAN AVE FORT MYERS, FL 33916 P.O. Box 6036 Fort Myers Fl 33911

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: PROPERTY MANAGER SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Andrea T. Cleet- President/Owner 4303 Avian Ave Fort Myers, FI 33916

2000 MAR 17 MM 6: 48
SECRETARY OF STATE
ASSEE, FLORID.

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: Andrea T. Cleet 4303 Avian Ave Fort Myers, FI 33916

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Andrea T. Cleet 4303 Avian Ave Fort Myers, Fl 33916

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

ignature/Registered Agent

Signature/Incorporator

Date

Date

0 MAR 17 AM 8:

STATEMENT OF ACCEPTANCE

I, Andrea T. Cleet, do accept the the role as Registered Agent for **ADM Property Services Corporation.**

Thank you,

Andrea T. Cleet 4303 Avian Ave

Ft. Myers, Fl 33916