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(Address)

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(City/State/Zip/Phone #)

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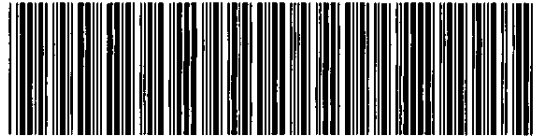
(Business Entity Name)

(Document Number)

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2008 APR 21 PM 12:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers APR 21 2008

COVER LETTER

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

SUBJECT: A-1 SERVICES OF BOCA RATON 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: JOHN J. ACKERMAN
Name (Printed or typed)

19873 VILLA MEDICI PL
Address

Boca Raton FL 33434
City, State & Zip

561-239-1936
Daytime Telephone number

SECRET
DIVISION OF
TALLAHASSEE, FLORIDA

2008 APR 21 PM 12:03

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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-1 SERVICES OF BOCA RATON INC.**ARTICLE II PRINCIPAL OFFICE**The principal street address and mailing address, if different is:**19873 VILLA MEDICI PLACE, BOCA RATON
FLORIDA 33434****ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PROFIT**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):

**JOHN J. ACKERMAN: Pres. Vice, Secy
19873 VILLA MEDICI PL, BOCA RATON FL 33434****ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:**19873 VILLA MEDICI PLACE, BOCA RATON
FLORIDA 33434****ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:**JOHN J. ACKERMAN
19873 VILLA MEDICI PL
BOCA RATON FL. 33434**

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

4-15-2008

Date

4-15-2008

Date

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2008 APR 21 PM 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA