

POS000068504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

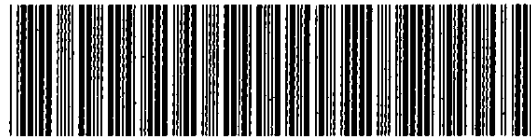
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08 JUL 18 AM 6:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature

COVER LETTER

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

SUBJECT: A+ LOCKSMITH 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: A+ LOCKSMITH INC.

Name (Printed or typed)

3244 N. POWERLINE RD, SUITE B

Address

POMPANO BEACH, FL 33069

City, State & Zip

(954) 977-0100

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:

A+ LOCKSMITH INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

3244 N. POWERLINE RD. SUITE B
POMPANO BEACH, FL 33069

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LOCKSMITH

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

HAIM COHEN, PRESIDENT

3244 N. POWERLINE RD, SUITE B

POMPANO BEACH, FL 33069

RAFAEL COHEN, VICE PRESIDENT

3244 N. POWERLINE RD. SUITE B

POMPANO BEACH, FL 33069

ARTICLE VI REGISTERED AGENT

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

HAIM COHEN

3244 N. POWERLINE RD, SUITE B

POMPANO BEACH, FL 33069

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

HAIM COHEN

3244 N. POWERLINE RD, SUITE B

POMPANO BEACH FL, 33069

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

07/15/08

Date

07/15/08

Date

FILED
08 JUL 18 AM 6:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA