## PD 80000 7027/

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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JUL 25 2008 D. A. WHITE

## **COVER LETTER**

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

SUBJECT: _	ABJ (PR	Metal	Fabrico	tion 4	Maint	enance,	INC
<del>- "</del>	(PR	OPOSED CORPO	DRATE NAME – I	MUST INCLUI	DE SUFFIX)	,	

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 \$\sum \frac{1}{2}\$ \$78.75 \$\sum \frac{1}{2}\$ \$87.50 \$\text{Filing Fee}\$ & Certificate of Status \$\text{Certified Copy}\$ & Certificate of Status \$\text{ADDITIONAL COPY REQUIRED}\$

FROM: Sheila Diane Jones Name (Printed or typed)
3437 Keysville Road East
Lithia F1 33547
Clty, State & Zip
8)3-737-2773  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: ABJ Metal Fabrication & Maintenance, INC. ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 3437 Neysville Road East Lithia, Fl 33547 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Construction and fabrication ARTICLE IV SHARES The number of shares of stock is: 7,000 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Sheila Diane Jones 3437 Keysville Road East Lithia F1 33547 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Sheila Diane Jones 3437 Keysville Road East L: thia F1 33547 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Sheila Diane Jones Keysuille Road East Lithia, FI 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 Sheela Deane Jone Signature/Registered Agent Sheela Deane Jone