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(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)	_			
(Southernames)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE TALLAHASSEE; FLORIDA

BBOCT IL M. S.

COVER LETTER

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

14.14.16.550, 12.525			
SUBJECT: AJO E	Business Admin, Inc (PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an original	inal and one (1) copy of the artic	cles of incorporation and	l 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:	Anibal J Ortiz Name (Printed or typed)		
		W 64th Way Address	
		Florida 33321 , State & Zip	· · · · · · · · · · · · · · · · · · ·
	954-600 Daytime 1	0-0289 Felephone 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 J O Business Admin, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: same as above

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Business Administration

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
Anibal J Ortiz
5720 NW 64th Way
Tamarac, Florida 33321
Owner

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: Anibal J Ortiz 5720 NW 64th Way Tamarac, Florida 33321

Owner

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Anibal J Ortiz 5720 NW 64th Way Tamarac, Florida 33321 Owner

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	Date
All land of the	10-1-08
Signature/Incorporator/ King With	Date