

PO9 000056188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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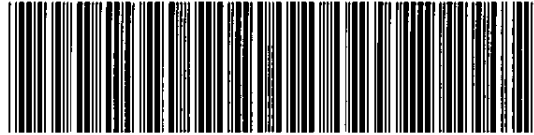
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/29/09--01014--008 **78.75

FILED
2009 JUN 29 PM 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN 30 8:00 AM

COVER LETTER

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

SUBJECT: Aman Business Solutions, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Pamela Rush
Name (Printed or typed)

P.O. Box 144
Address

Gotha FL, 34734
City, State & Zip

407 702-3116
Daytime Telephone number

pam.rush@hotmail.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN 29 PM 1:05

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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: Aman Business Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

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

13226 Zori Lane Windermere FL 34786

P.O. Box 144 Gotha FL 34734 (mailing)

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

Pamela Rush
13226 Zori Lane
Windermere FL 34786

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Pamela Rush
13226 Zori Lane
Windermere FL 34786

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

6/22/09

Date

6/22/09

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN 29 PM 1:05

FILED