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(Requestor's Name)	
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
(Common variable)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer: As poor VB name is different aling dec	
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Office Use Only



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SECRETARY OF STATE
AND ASSECTION OF STATE

COVER LETTER

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

евовен	PRESERVATION, INC (PROPOSED CORPORA)	ΓΕ NAME – <u>MUST INCL</u>	UDE SUFFIX)
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nclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:
Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM: DO	NNA R. BROWN		2010 SEP 17 SECRETARY TALLAHISSE
	Name	(Printed or typed)	F.F.SES
ĹAK	E BUTLER, FLORIDA 32054 City.	State & Zip	
352-	. 339-6181		
DRB	ROWN60@HOTMAIL.Com	elephone number for future annual report	

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 5, 2010

DONNA R. BROWN 6099 SW 67TH STREET LAKE BUTLER, FL 32054

SUBJECT: A-ONE PRESERVATION, INC

Ref. Number: W10000036796

We have received your document for A-ONE PRESERVATION, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Regulatory Specialist II New Filing Section

Letter Number: 810A00018856

9/11/10

850-245-6804

To: Diane

From: Donna Brown

Re: Ry# W10000036796.
A-One Preservation, Inc.

SECRETARY OF STATE

I am ouware that there exist another Compan with a simular name.

Please approve. Thank you

Thank you Drown

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

A-ONE PRESERVATION, INC

FILED

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SECRET, BY OF STATE TALLARMASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 6099 SW 67TH STREET

LAKE BUTLER, FL 32054

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: PRESERVE FORECLOSURE HOMES

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):
DONNA BROWN, 6099
SW 67TH STREET, LAKE
BUTLER, FLORIDA
32054. PRESIDENT

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Donna Brown 6099 SW 67TH STREET, LAKE BUTLER, FLORIDA 32054

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: DONNA R. BROWN, 6099 SW 67TH STREET, LAKE BUTLER 32054

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

06/30/2010

Date

0/30/20/0