

P10000084738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

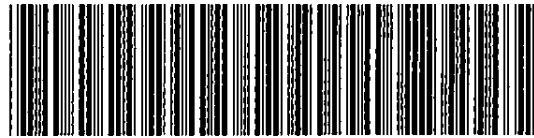
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Certificates of Status ☐

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DIVISION OF CORPORATIONS
2010 OCT 18 PM 1:55
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FILED
10 OCT 18 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/18/10

COVER LETTER

FILED

10 OCT 18 AM 02:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT:

Ability 1 on 1, 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:

Phil Amselem

Name (Printed or typed)

6382 Belgrand dr

Address

Tallahassee, FL 32312

City, State & Zip

850-~~551~~ 509-9348

Daytime Telephone number

~~Phil~~ Philfit@comcast.net

E-mail address: (to be used for future annual report notification)

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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

Ability 101, inc

10 OCT 18 PM 05

ARTICLE II PRINCIPAL OFFICE

Principal street address

5555-2 Roanoke Trail
Tallahassee FL 32312

SECRETARY OF STATE
Mailing address, if different is:
6382 Belgrand Dr
Tallahassee FL 32312

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

one on one exercise consulting.

ARTICLE IV SHARES

The number of shares of stock is:

100 -

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Phil Amselem, Owner, President
Address: 6382 Belgrand Dr
Tallahassee FL 32312

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Phil Amselem
Address: 6382 Belgrand Dr
Tallahassee FL 32312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Phil Amselem
Address: 6382 Belgrand Dr
Tallahassee FL 32312

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

Required Signature/Registered Agent

Date

10/18/10

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

Date

10/18/10