

P10000/00285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
FILED

1/1

## COVER LETTER

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

SUBJECT: AG's All the Time Movers Corp.

(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: Leonard C. Agee Sr.

Name (Printed or typed)

2939 Jefferson St.

Address

Mims, FL 32754

City, State & Zip

321-863-8802

Daytime Telephone number

Ragee2878@yahoo.com

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)

ARTICLE I NAME

The name of the corporation shall be:

AG's All the Time Movers Corp.

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AND  
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ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

639 Childre Ave.

Titusville, FL 32796-5114

10 DEC 10 PM 3:06  
Mailing address, if different is:

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Leonard C. Agee Sr. President

Address: 2939 Jefferson St.

Mims, FL 32754

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Leonard C. Agee Jr. Vice President

Address: 2939 Jefferson St.

Mims, FL 32754

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: Rodmika D. Agee

Address: 2939 Jefferson St.

Mims, FL 32754

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Leonard C. Agee Sr.

Address: 2939 Jefferson St.

Mims, FL 32754

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

 Rodmika D. Agee  
Required Signature/Registered Agent

12-08-2010  
Date

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.

 Leonard C. Agee Sr.  
Required Signature/Incorporator

12-08-2010  
Date