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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
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From:

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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FLORIDA PROFIT/NON PROFIT CORPORATION
A's Five Corp.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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Corporate Filing Menu

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Handwritten signature and date 1/13/11

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DIVISION OF CORPORATIONS

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FLORIDA FILING & SEARCH

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COVER LETTER

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

SUBJECT: A's Five 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: Kerry Jester

Name (Printed or typed)

1220 North Market Street Ste 808

Address

Wilmington, DE 19801

City, State & Zip

302-421-5752

Daytime Telephone number

fridhardson@comcast.net

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

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

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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's Five Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address
11710 Old Georgetown Rd. Ste 808
Rockville, MD 20852

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Construction

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Frederic Richardson, Director</u>	Name and Title: _____
Address: <u>11710 Old Georgetown Rd. Ste 808</u>	Address: _____
<u>Rockville, MD 20852</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: Florida Filing & Search Services, Inc.
Address: 155 Office Plaza Drive Ste A
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kerry Jester
Address: 1220 North Market Street Ste 808
Wilmington, DE 19801

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

RW Hod
Required Signature/Registered Agent

1/12/11
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.

Kerry Jester
Required Signature/Incorporator

1/12/11
Date