## P11000029322

(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
(City/Otate/Zipi/ Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Germinates of equitors
Special Instructions to Filing Officer:
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DIVISION OF CORFORATIONS

March 17, 2011

AARON KAHLER 411 E. MONROE ST. STE. 101C JACKSONVILLE, FL. 32202

SUBJECT: KAHLER'S 24/7 BAIL BONDS INC.

Ref. Number: W11000015430

We have received your document for KAHLER'S 24/7 BAIL BONDS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 611A00006528

## **COVER LETTER**

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

SUBJECT: KAHLE	R'S 24/7	BAIL BON	DS INC.
(PR	OPOSED CORPORA	TÉ NAME – <u>MUST IN</u>	CLUDE SUFFIX)
Enclosed are an original and one	e (1) copy of the arti	cles of incorporation a	and a check for:
\$70.00 \$78.75 Filing Fee & Certifi	ce icate of Status	& Certified Copy	& Certificate of Status
		ADDITIONAL	COPY REQUIRED
	ARON KAH Name 1 E. MONRO	LER (Printed or typed)  DE ST. STE. Address	1016
Ja	cksonville,	FL 32202 State & Zip	
	(904) 465 Daytime To	- 5545	·
E-ma	ahlers bail bon	JS @ yahoo, I for future annual repo	COM rt 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 II PR	INCIPAL OFFICE	34 32	10.1100
	Principal street address	Mailing add	lress, if different is:
	III E MONROE ST., STE. 1010		
	lacksonville FL 32202		,
ARTICLE III PUI	RPOSE		
	the corporation is organized is:		
For profi	t bail bonds business	•	= = = = = = = = = = = = = = = = = = =
			22 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
			ms R
			71
ARTICLE IV SH			LOR FINITE
The number of shares o	f stock is: O		5H 2
ARTICLE V IN	TIAL OFFICERS AND/OR DIRECTOR	RS	<b>&gt;</b>
Name and Title:_		Name and Title:	
Address: _		Address:	
-			
- A. M. A. M. C.			
Name and Title;_ Address:		Name and Title:	
rudicas			
_		<del></del>	
Name and Title:		Name and Title:	
			<del> </del>
_		<del>_</del>	
	<u>GISTERED AGENT</u>		
The <u>name and Florida</u> Name:	street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Address:	4750 Sapoho Ave.	<del>-</del>	
	4750 Sappho Ave. Jacksonville FL 32205	<del>-</del> -	
ARTICLE VII INC	CORPORATOR		
The name and address	of the Incorporator is:		
Name:	AARON KAHLER 4750 Sappho Ave Jacksonville FL 32205	_	
Address:	4750 Sappho Ave	_	
	JULISON VITTE FE JEZZOS	_	
	registered agent to accept service of process		
this certificate, I am fan	niliar with and accept the appointment as reg	ristered agent and agree to act	in this capacity
//-	non Waller		3/09/2011
	Required Signature/Registered Agent	**************************************	3/09/20// Date
	t and affirm that the facts stated herein are ment of State constitutes a third degree felon		
<del>-</del>	-		1.0.
Clare	Required Signature/Incorporator		3/09/2011
<del></del>		- <del></del>	<del></del>