

P11000105674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

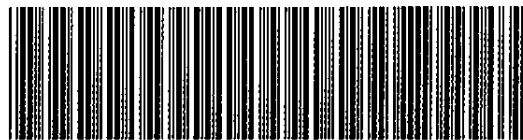
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

~~111-61056~~

Office Use Only



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12/05/11--01016--011 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 DEC 12 AM 9:37

RECEIVED
AND
FILED

111

COVER LETTER

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

SUBJECT: AAMBC OF G.T.B., 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: Geoff Groves
Name (Printed or typed)
4401 W. Hillsborough Ave.
Address
Tampa Florida 33614
City, State & Zip
813-887-3339
Daytime Telephone number
J.Groves6@verizon.net
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 6, 2011

GEOFF GROVES
4401 W. HILLSBOROUGH AVE
TAMPA, FL 33614

SUBJECT: AAMBC OF G.T.B., INC
Ref. Number: W11000061056

We have received your document for AAMBC OF G.T.B., 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):

Please list the name of the corporation in Article I.

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.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 011A00027272

ARTICLES OF INCORPORATION

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

411 HUEL
AND
FILED

ARTICLE I NAME

The name of the corporation shall be:

AAMBC OF G.T.B. Inc

11 DEC 12 AM 9:37

ARTICLE II PRINCIPAL OFFICE

Principal street address

4401 W. Hillsborough Ave.
Tampa FL 33625

Mailing address, if different is
TALLAHASSEE FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Address:

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:

Address:

Geoff Groves
4401 W. Hillsborough Ave.
Tampa FL 33625

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Address:

Heidi Groves
5817 Kumquat Ct.
Tampa FL 33625

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

Geoff P. Groves

Required Signature/Registered Agent

11-23-11

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.

Heidi Groves

Required Signature/Incorporator

11-23-11

Date