

P12000005317

(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:

Office Use Only



800218222288

01/13/12--01006--028 \*\*87.50

FILED  
12 JAN 13 PM 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

F. BURCH JAN 17 2012

## COVER LETTER

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

**SUBJECT:** American Standards, 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:** Travis Goodale

Name (Printed or typed)

5248 Cluster Oaks ct

Address

Jacksonville, FL 32258

City, State & Zip

904-422-9215

Daytime Telephone number

brarmbruster@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: American Standards, Inc.

## ARTICLE II PRINCIPAL OFFICE

Principal street address  
5248 Cluster Oaks ct  
Jacksonville, FL 32258

Mailing address, if different is:

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Home Restoration, Construction, Remodeling, Marine Construction, Marketing, and Land Sales and Development.

## ARTICLE IV SHARES

The number of shares of stock is: 100,000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Travis Goodale, President

Address: 5248 Cluster Oaks ct  
Jacksonville, FL 32258

Name and Title:

Address:

Name and Title: Brian Armbruster, V.P. and Chief Financial Officer

Address: 5248 Cluster Oaks ct  
Jacksonville, FL 32258

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: Travis Goodale

Address: 5248 Cluster Oaks ct  
Jacksonville, FL 32258

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Travis Goodale

Address: 5248 Cluster Oaks ct  
Jacksonville, FL 32258

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

Travis J Goodale

Required Signature/Registered Agent

January 9, 2012

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.

Travis J Goodale

Required Signature/Incorporator

January 9, 2012

Date

FILED  
2012 JAN 13 PM 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA