

P12000098261

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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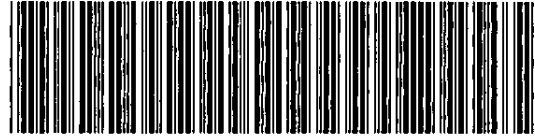
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 NOV 29 AM 11:35

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

11/30/12

COVER LETTER

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

SUBJECT: AAAUTS, 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: JASON D. MELFORD
Name (Printed or typed)
1265 FLORIDA STREET
Address
FLEMING ISLAND, FL 32003
City, State & Zip
904-460-5428
Daytime Telephone number
LEON@LH-BOOKKEEPING.COM
E-mail address: (to be used for future annual report notification)

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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)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be: **AAUTS, INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address
1265 FLORIDA STREET
FLEMING ISLAND, FL 32003

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Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **LANDSCAPING.**

ARTICLE IV SHARES

The number of shares of stock is: **1**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JASON D. MELFORD

Address: 1265 FLORIDA STREET

FLEMING ISLAND, FL 32003

PRESIDENT

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: JASON D. MELFORD

Address: 1265 FLORIDA STREET

FLEMING ISLAND, FL 32003

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JASON D. MELFORD

Address: 1265 FLORIDA STREET

FLEMING ISLAND, FL 32003

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

X Jason D. Melford
Required Signature/Registered Agent

11/27/12
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.

X Jason D. Melford
Required Signature/Incorporator

11/27/12
Date