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PICK-UP WAIT MAIL				
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(Business Entity Name)				
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(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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ECRETARY OF STATE

EAHASSEE, FLORID

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COVER LETTER

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

SUBJECT: A PLUS TINTING, 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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED		

YAN	ETH ALEXANDRA MENESES
•	Name (Printed or typed)
324 5	SE BLOXHAM WAY
	Address
STUA	ART, FL 34997
	City, State & Zip
772 6	634-0874
	Daytime Telephone number
yaneth	nameneses@hotmail.com
F	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)

2201 SE INDIA	INCIPAL OFFICE Principal street address ANT STREET UNIT E-7	Mailing addr	ess, if different is:
STUART, FL.			
he purpose for which	the corporation is organized is:	E WINDOW TINTING	S INSTALLATION
			FR 55
RTICLE IV SHA		8	ASSEE, FLORIDA
Name and Title	VANETH ALEYANDDA MENEGES DOEGIDENT	Name and Title:	
Address	STUART, FL 34997	Address:	
Name and Title:		Name and Title:	
Address		Address:	
Name and Otto			

Name and Ti	tie:	Name and Title:
Address		Address:
RTICLE VI R	EGISTERED AGENT	
he <u>name and Flori</u> c	la street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	ANETH ALEXANDRA MENESES	差 る れ
Address:	324 SE BLOXHAM WAY	望 き だ
_5	STUART, FL 34997	
	SS of the Incorporator is:	TO SEE TO
Name:	YANETH ALEXANDRA MENESES	`
Address:	324 SE BLOXHAM WAY	
	STUART, FL 34997	
	as registered agent to accept service of process familiar with and accept the appointment as regin	
	Required Signature/Registered Agent	Date
	ent and affirm that the facts stated herein are to artiment of State constitutes a third degree felony	4/00/40
/ /	Required Signature/Incorporator	Date
\mathcal{U}		