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(Requestor's Name)		
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(City/	State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Rusi	ness Entity Nam	20)
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(Doce	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
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Office Use Only



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J. Shivers MAR 0 4 2013

DEPARTMENT OF STATE

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SECRETARY OF STATE
TALLAHASSEE FLORI

COVER LETTER

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

SUBJECT: A+ Shieldmen and Glass Inc (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)				
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	a check for:		
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
	ADDITIONAL COPY REQUIRED			
FROM: Daniel Hast	(Printed or typed)			
70 tom white	e (n.			
Crowford ville fl 32327 City, State & Zip				
4504 8 8 Daytime To	1268 elephone number	·		
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 II PRINCIPAL OFFICE			
Principal street address	· ·	dress, if different is:	
Crawfordulle F1 32327			
ARTICLE III PURPOSE		,	
The purpose for which the corporation is organized is:			
Any and All lawfull Business	es in florida		
•		·	
		•	
ARTICLE IV SHARES			
The number of shares of stock is: 100		·	
ARTICLE V INITIAL OFFICERS AND/OR DIREC	TORS		
Name and Title: Deniel Hert Ces	Name and Title:		
Address: 10 ton white in	Address:		
Crueberrulle El 32327			
	,		
Name and Title: Lorse Kielerowsk Address: 70 ton - 4m to In V			
Carpidoile \$1 3232			
· ·			
Name and Title:	Name and Title:	<u> </u>	
Address:	Address:		
<u> </u>			
		The Control	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptal	sla) of the registered agent is:		
Name: Don't Hat	——	25 1 423	
Address: 70 tou whote In		Signal Comments	
Cranforduille 61 323	27	78 3 73	
ARTICLE VII INCORPORATOR			
The <u>name and address</u> of the Incorporator is:		第 2	
Name: Denial Hart Address: 70 tou what h			
Address: 70 tou whole In	12 T		
Having been named as registered agent to accept service of pr	encase for the above stated corne	ration at the place designated in	
this certificate, I am familiar with and accept the appointment			
11			
Required Signature/Registered Agen	 	3-4-12 Date	
Required Signature/Registered Agen	t	Date	
I submit this document and affirm that the facts stated herei			
document to the Department of State constitutes a third degree	felony as provided for in s.817,1.	55, F.S.	
10 1011		3-4-17	

Required Signature/Incorporator

I Powel Hout will not remotate At ShouldmenedClass Inc Doc# 8/10/00011091. And release the Nome

Dudtat

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