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(Re	equestor's Name)	
(Ad	dress)	<u> </u>
. (Ad	dress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SEGRETARY OF STATE
ALLAHASSEE, ELCHIDA

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COVER LETTER

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

SUBJECT: Air Conditioning & Refrigeration Shield, 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
		ADDITIONAL CO	& Certificate of Status PPY REQUIRED

FROM:	Alejandro Buitrago
i KOWI.	Name (Printed or typed)
	364 NW 46th Street
•	Address
	Fort Lauderdale, FL 33309
•	City, State & Zip
	954-607-0963
•	Daytime Telephone number
-	alexbuitrago@rocketmail.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)

<u> ICLE II PRI</u>	NCIPAL OFFICE		
. A. N.N.A. A.C.I	Principal street address	Mailing address, if different is	5 :
64 NW 46t	in Street	7.0	
ort Lauder	dale, FL 33309		6
		افتراني المرابع	19
		- Contraction of the contraction	22
TICLE III PUR	PPOSE the corporation is organized is:	20	ستر ڊن
•		epairs and maintenance services to f	no ne
FICLE IV SH	<u>4RES</u> Stock is: 500		
TICLE V INI	TIAL OFFICERS AND/OR DIRECTOR		
TICLE V INI			
FICLE V INT	TIAL OFFICERS AND/OR DIRECTOR e:Alejandro Buitrago -President	Name and Title:	
Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR: Alejandro Buitrago -President 364 NW 46th Street Fort Lauderdale, FL 33309	Name and Title:	
Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR: Alejandro Buitrago -President 364 NW 46th Street Fort Lauderdale, FL 33309	Name and Title: Address: Name and Title:	
Name and Title Address Name and Title	TIAL OFFICERS AND/OR DIRECTOR: Alejandro Buitrago -President 364 NW 46th Street Fort Lauderdale, FL 33309	Name and Title: Address: Name and Title:	
Name and Title Address Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR Alejandro Buitrago -President 364 NW 46th Street Fort Lauderdale, FL 33309	Name and Title: Address: Name and Title:	

Name and Title:		Name and Title:		FILED			
Address		Address:	10 000		PM 3: 04		
		- -	SE0 TALL	RETARY O AHASSEE,	F STATE		
ARTICLE VI The name and Flo	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	`the registered agen	t is:				
Name:	Alejandro Buitrago						
Address:	364 NW 46th Street						
1144.0551	Fort Lauderdale, FL 33309	•					
ARTICLE VII The name and ad Name:	INCORPORATOR dress of the Incorporator is: Alejandro Buitrago						
Address:	364 NW 46th Street	•					
this certificate. The	Fort Lauderdale, FL 33309 new is registered agent to accept service of process in familiar with and accept the appointment as regional service of grant and accept the appointment as regional services are serviced bearing are	istered agent and a	gree to act in i	this capacity 9/14/ Dat	1 2 * 19 e		
document to the l	ument and affirm that the facts stated herein are bepartment of State constitutes a third degree felon	true. I am aware ti y as provided for in	nat the false it s.817.155, F.	njormation s S.	ubmitted in a		
	Required Signature/Incorporator			9/14	2013 ate		