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(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:				
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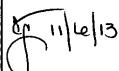


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SEUNCTARY OF STATE HV151C3 OF CORPORATION



COVER LETTER

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

SUBJECT: HBC 6 ass 9 COMPANY, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
	(I ROI OSED CORI ORA	TE NAME - HOST THEE	ODE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d 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		
		ADDITIONAL CC		Ţ	
FROM:	Brian Toennies	Printed or typed)	<u>S</u>		
	9730 E Wate	som Rd., Sui Address	te 100		n me
St. Louis Mo 63126 &					NECESIAI DECESIAI
314) 843-0477 Daytime Telephone number					FILEB FORPOR FORPOR
Paige @ toenniescpa. 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 ABC Glass & Compan The name of the corporation shall be: PRINCIPAL OFFICE Mailing address, if different is: Principal street address ARTICLE III PURPOSE The purpose for which the corporation is organized is: The Corporation is formed Autoglass repair corporation is also formed to 1000 moltes ARTICLE IV SHARES 100 The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS (Pres) Name and Title: Name and Title: Address Name and Title:__ _____ Name and Title:_ Address _____ Address: Name and Title:_ __ Name and Title:_ Address _____ Address:

Name and Title:	Nar	ne and Title:
Address	Ad-	dress:
	ERED AGENT address (P.O. Box NOT acceptable) of the r	registered agent is:
Name: Rand	y D. Foran	
Address: 5036	tay, FL 34490	
ARTICLE VII INCORPO	DRATOR	
The <u>name and address</u> of the	Incorporator is:	
Name: <u>Ran</u>	dy D. Foran	
Address: 50.	36 Castile Lane liday, FL 34690	
	ered agent to accept service of process for t with and accept the appointment as registere	the above stated corporation at the place designated in ed agent and agree to act in this capacity
Gr und	quired Signature/Registered Agent	10/3//15 Date
document to the Department	affirm that the facts stated herein are true. of State constitutes a third degree felony as p Lequired Signature/Incorporator	I am aware that the false information submitted in a provided for in s.817.155, F.S. Pate

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