

PI 3000097227

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

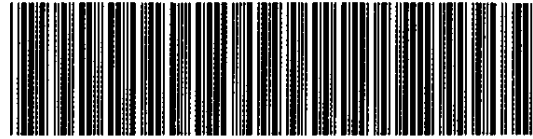
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
CORPORATION  
13 DEC -6 PM 2:20

12913

## COVER LETTER

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

SUBJECT: AAA American Bail Bonds, Inc  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00	<input checked="" type="checkbox"/> \$78.75
Filing Fee	Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status

**ADDITIONAL COPY REQUIRED**

FROM: Catherine Crespo  
Name (Printed or typed)

1101 S Andrews Ave  
Address

Fort Lauderdale, FL 33316

954 463 6363

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Daytime Telephone number

**Bondmeout@aol.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)

FILED  
CLERK OF DISTRICT COURT  
13 DEC -6 PM 2:28  
CORPORATIONS

**ARTICLE I NAME**

The name of the corporation shall be: AAA American Bail Bonds, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1101 S Andrews Ave  
Fort Lauderdale, FL 33316

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Professional Corporation  
Bail Bond Agency

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Catherine Crespo, Pres

Name and Title: \_\_\_\_\_

Address: 1101 S Andrews Ave  
Fort Lauderdale, FL 33316

Address: \_\_\_\_\_

Name and Title: Shane Ciriago, Treasurer

Name and Title: \_\_\_\_\_

Address: 1101 S Andrews Ave  
Fort Lauderdale, FL 33316

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

(cont)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Catherine Crespo

Address: 1101 S Andrews Ave  
Fort Lauderdale, FL 33316

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Catherine Crespo

Address: 1101 S Andrews Ave  
Fort Lauderdale, FL 33316

*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*

Catherine Crespo

Required Signature/Registered Agent

November 18, 2013

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.*

Catherine Crespo

Required Signature/Incorporator

November 18, 2013

Date