

PA000009108

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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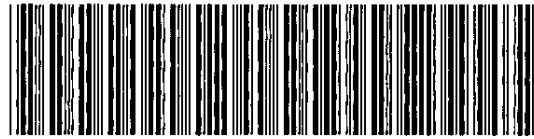
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
14 JAN 30 PM 1:50
DIVISION OF CORPORATION

FILED
14 JAN 30 AM 8:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 985018 7777916

AUTHORIZATION :

COST LIMIT : \$ 78.75

ORDER DATE : January 30, 2014

ORDER TIME : 12:39 PM

ORDER NO. : 985018-005

CUSTOMER NO: 7777916

DOMESTIC FILING

NAME: AGI ACQUISITION, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS: _____

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TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME AGI Acquisition, Inc.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address
AGI Acquisition, Inc. c/o Jean Desautels
7830 Freeway Circle
Middleburg Heights, Ohio 44130

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any lawful act or activity for
which corporations may be organized under the Florida Business Corporation Act
, but the Corporation is not formed to engage in any act or activity
requiring the consent or approval of any state official, department, board,
agency, or other body without first having obtained such consent or approval.

ARTICLE IV SHARES 1,000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Yves Barrette, Director

Address 583 Grd Bernier Nd
 St. Jean Sur Richeelieu
 Quebec J3b-8K1

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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(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:

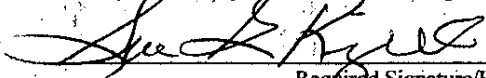
Name: Corporation Services Company
Address: 1201 Hays Street
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Todd Butler
Address: 1200 Abernathy Rd., Bld. 600, Ste 1700
Atlanta, GA 30328

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

 Sue G. Knight
Required Signature/Registered Agent VICE President

1/30/2014

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.

 _____
Required Signature/Incorporator

1/30/2014

Date

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