

P14000012650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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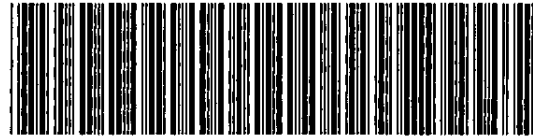
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2014 FEB -5 AM 11:49

VH

COVER LETTER

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

SUBJECT: **Ag Aces Mobile Repair Services, 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
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: **Heather L. Johnson**

Name (Printed or typed)

140 SW Quincy Terrace

Address

Lake City, Florida 32024

City, State & Zip

(386) 438-5431

Daytime Telephone number

agacesmobilerepairservice@yahoo.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
SECRETARY OF STATE
DIVISION OF CORPORATION

ARTICLE I NAME

The name of the corporation shall be: Ag Aces Mobile Repair Service, Inc. 2014 FEB -5 AM 11:49

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

140 SW Quincy Terrace
Lake City, Florida 32024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Todd A. Johnson

Name and Title: Heather L. Johnson

Address 140 SW Quincy Terrace

Address: 140 SW Quincy Terrace

Lake City, Florida 32024

Lake City, Florida 32024

CEO

COO

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2014 FEB -5 AM 11:50

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: Heather L. Johnson
Address: 140 SW Quincy Terrace
Lake City, Florida 32024

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Heather L. Johnson
Address: 140 SW Quincy Terrace
Lake City, Florida 32024

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

Heather L. Johnson
Required Signature/Registered Agent

02/03/2014

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.

Heather L. Johnson
Required Signature/Incorporator

02/03/2014

Date