P1400083749

(Requestor's Name)				
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	ə #)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			

Office Use Only



800265173368

10/09/14--01026--010 **87.50

TILED

14 OCT -9 MIN: 3

SECRETARY OF MARKET

10/10/14

COVER LETTER

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

SUBJECT: Alpha & Omega Transaction Services Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles 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 PPY REQUIRED

FROM:	Steven Worley
	Name (Printed or typed)
	478 E. Altamonte Dr. Suite 108-194
	Address
	Altamonte Springs, FL 32701-4622
	City, State & Zip
	407-536-1382
	Daytime Telephone number
	alphaomega32701@yahoo.com

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)

	INCIPAL OFFICE Principal street address Onte Dr. Suite 108-194	Mailing	address, if different is:
Itamonte Sp	orings, FL 32701-4622	***************************************	
RTICLE III PUI e purpose for which	RPOSE the corporation is organized is:	nt holding	
			74 75 75 75 75 75 75 75 75 75 75 75 75 75
			0CT -9
			······································
RTICLE IV SH e number of shares o	ARES f stock is:		M II: 34 5.78 E 5.780A
RTICLE V IN	TIAL OFFICERS AND/OR DIRECTORS	 Vame and Title:_	M II: 34 9.78/B 9.78/0A
RTICLE V IN	Steven Worley President 478 E. Altamonte Dr. Suite 108-194	Name and Title:	M II: 34 9.78/B 9.78/0A
RTICLE V IN	trial officers and/or directors le: Steven Worley President		MIN: 34 EL WOA
Name and Tit Address	Steven Worley President 478 E. Altamonte Dr. Suite 108-194	Address:	MITH 34 FLASE
Name and Tit Address	Steven Worley President 478 E. Altamonte Dr. Suite 108-194 Altamonte Springs, FL 32701-4622	Address: Jame and Title:	MIII: 34
Name and Tit Address Name and Title	Steven Worley President 478 E. Altamonte Dr. Suite 108-194 Altamonte Springs, FL 32701-4622	Address: Jame and Title:	MITH 36
Name and Tit Address Name and Titl Address	Steven Worley President 478 E. Altamonte Dr. Suite 108-194 Altamonte Springs, FL 32701-4622	Address: Jame and Title: Address:	MIII: 34

Name and	Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
The name and Flo	orida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Steven Worley	
Address:	478 E. Altamonte Dr. Suite 108-194	·A
	Altamonte Springs, FL 32701-4622	SEC 7
ARTICLE VII	INCORPORATOR	
The name and ad	dress of the Incorporator is:	
Name:	Steven Worley	
Address:	478 E. Altamonte Dr. Suite 108-194	34 A
	Altamonte Springs, FL 32701-4622	
this certificate, I a	m familiar with and accept the appointment as reg	for the above stated corporation at the place designated in stered agent and agree to act in this capacity
Du	on telely	10-7-14
	Required Signature/Registered Agent	Date
	iment and affirm that the facts stated herein are to Department of State constitutes a third degree felony	rue. I am aware that the false information submitted in a as provided for in s.817.155, F.S.
Dte	Required Signature/Incorporator	10-7-14 Date