

P/4000089696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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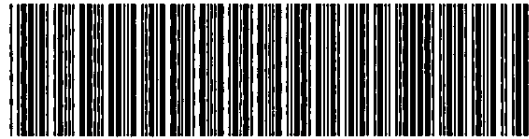
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/04/14

COVER LETTER

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

SUBJECT: A & H Estate Sales, 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: Amy Romaine

Name (Printed or typed)

971 Bayberry Ln.

Address

Rockledge, FL 32955

City, State & Zip

321-759-0633

Daytime Telephone number

amyromaine@cs.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

The name of the corporation shall be: A & H Estate Sales, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

971 Bayberry Ln.

Rockledge, FL 32955

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To organize, appraise, purchase, sell, donate,
and otherwise liquidate personal property on behalf of individuals and
authorized third parties. To prepare and stage real property for sale.

ARTICLE IV SHARES

The number of shares of stock is: 20

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Amy M. Romaine

Name and Title: Havana J. Gardner

Address 971 Bayberry Ln.

Address: 971 Bayberry Ln.

Rockledge, FL 32955

Rockledge, FL 32955

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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TALLAHASSEE, FLORIDA

(conti.)

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: Law Office of A. M. Romaine, PA
Address: 3585 Murrell Rd., Ste. B
Rockledge, FL 32955

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Amy M. Romaine
Address: 971 Bayberry Ln.
Rockledge, FL 32955

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TALLAHASSEE, FLORIDA

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


Required Signature/Registered Agent

10/25/14
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

10/25/14
Date