## P15000019964

(Requestor's Name)				
(Address)				
(Ac	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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## **COVER LETTER**

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

SUBJECT:	Area One	Enterprise	s, Inc.
	' (PROPOSED CORPORA	TE NAME – <u>MÜST INCL</u>	ÜDE SÜFFIX)
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	l 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 CO	PY REQUIRED
FROM:	7420	CZito (Printed or typed) 39th Ct. E	
	Sara S	Sota FL 3	42-43
et alle her her he	94. Daytime Т	400 · 7982 elephone number	
	andizito 7	70 yahroo. C	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)

The name of the corpo	IME ration shall be: AVEA	One Finter	Drices	Inc.
	NINCIPAL OFFICE		`	
<i></i> ,,,,	Principal street address	21. 7.	_	ss, if different is:
	2 LOCKWOOD N	Pidge Rd	_Sav	ne
<u>Saraso</u>	ta to 34243			
	RPOSE			
The purpose for which	the corporation is organized is	:		
<del></del>	<del></del>			
				<del></del>
				<del> </del>
ARTICLE IV SH	IARES			
The number of shares of	of stock is:			
				<b>-</b>
	ITIAL OFFICERS AND/OR		بال ما	ALT. 15.
Name and Tit	le: ATICIA MUS	Y Name and Title	EXTLAY	
Address	<u>Mesident</u>	Address:	Vice	resident-
	626 Hand 1	Ave.	7420	39th B-E
	Sarasota, F	1 34232	Saras	ota 512:3434
		0 (20		Opin No
Name and Titl	e:	Name and Title	::	
Address		Address:	·	
		<del> </del>		
Name and Title	e:	Name and Title	::	
Address				
				-10000

Name and Title:	Name and Title:			
Address	Address:			
ADMICL BUT DECICEDED ACTIVE				
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) or	f the registered agent is:			
Name: Andrea Zito	-			
Address: 7420 39th Ct. E	-			
Surasota 12 3424	<u>3</u>			
ARTICLE VII INCORPORATOR				
The <u>name and address</u> of the Incorporator is:				
Name: Aicia Major	-			
Address: 1026 Hand Ave.	-			
Sarasota, FU 342	32			
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				
	2/26/15			
Required Signature/Registered Agent	· 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/Incorporation	2 26 15 Date			
V				

FILED

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SECREDARY OF STATE
TALLARASSEE FLORIDA