91500022782

(Requesto	or's Name)	
(Address)		
(Address)		
(City/State	e/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business	s Entity Name)	
(Documer	nt Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
	:	

Office Use Only

2559-611-



000269597830

03/02/15--01013--014 **78.75





COVER LETTER

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

AC Supply Super Store Corp.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

chelosed are all orig	mai and one (1) copy of the ar	deles of incorporation and	ra 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	

FROM: AC Supply Super Store Corp.
Name (Printed or typed)
6541 Pelican Terrace
Address
Coconut Creek, FL 33073
City, State & Zip
954-778-8028
Daytime Telephone number
رِجِي المحمد معطور کے مام معلی معلی المام معلی معلی المام معلی معلی المام معلی معلی معلی المام معلی معلی المام

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



March 4, 2015

AC SUPPLY SUPER STORE CORP. 6541 PELICAN TERRACE COCONUT CREEK, FL 33073

SUBJECT: AC SUPPLY SUPER STORE CORP.

Ref. Number: W15000015695

We have received your document for AC SUPPLY SUPER STORE CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

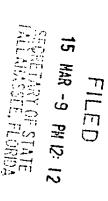
The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 315A00004499



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

ARTICLE II PR	VINCIPAL OFFICE Principal street address	15 MAR -9 PM Mailing address, if different is:
6541 Pelic	an Terrace	CECRETARY OF ST TALL AMASSEE, FLO
Coconut C	Freek, FL 33073	
ARTICLE III PUT The purpose for which Which corp	RPOSE In the corporation is organized is: Dorations may be incorporated incorporations.	page in any lawful activity for corated in this state.
		
		•
RTICLE IV SH he number of shares of	<u>IARES</u> 100,000	
DTICLE II IN	TTIAI. OFFICEDS AND/OD DIDECTOR	•
	ITIAL OFFICERS AND/OR DIRECTORS	
Name and Tit	TTIAL OFFICERS AND/OR DIRECTORS tle: Noodjarin Manophom, CEO 6541 Pelican Terrace	Name and Title:
	Noodjarin Manophom, CEO	
Name and Tit	Noodjarin Manophom, CEO 6541 Pelican Terrace	Name and Title:
Name and Tit	Noodjarin Manophom, CEO 6541 Pelican Terrace	Name and Title:
Name and Tit	Noodjarin Manophom, CEO 6541 Pelican Terrace Coconut Creek, FL 33073	Name and Title:
Name and Tit	Noodjarin Manophom, CEO 6541 Pelican Terrace Coconut Creek, FL 33073	Name and Title: Address: Name and Title:
Name and Tit Address Name and Titl	Noodjarin Manophom, CEO 6541 Pelican Terrace Coconut Creek, FL 33073	Name and Title: Address: Name and Title:
Name and Tite Address Name and Tite	Noodjarin Manophom, CEO 6541 Pelican Terrace Coconut Creek, FL 33073	Name and Title: Address: Name and Title:
Name and Tite Address Name and Tite Address	Noodjarin Manophom, CEO 6541 Pelican Terrace Coconut Creek, FL 33073	Name and Title: Address: Name and Title: Address:
Name and Tite Address Name and Tite Address	Noodjarin Manophom, CEO 6541 Pelican Terrace Coconut Creek, FL 33073	Name and Title: Address: Name and Title: Address: Name and Title:

Name and	Title: Name and Title:
Address	Address:
	REGISTERED AGENT
The name and Flo	rida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	Noodjarin Manophom
Address:	6541 Pelican Terrace
	Coconut Creek FL 33073
ARTICLE VII	INCORPORATOR
The name and add	Iress of the Incorporator is:
Name:	Noodjarin Manophom
Address:	6541 Pelican Terrace
	Coconut Creek, FL 33073
	ed as registered agent to accept service of process for the above stated corporation at the place designated in an accept the appointment as registered agent and agree to act in this capacity 03/05/2015
	Required Signature/Registered Agent 03/05/2015 Date
	ment and affirm that the facts stated herein are true. I am aware that the false information submitted in a epaytment of State constitutes a third degree felony as provided for in s.817.155, F.S.
	Required Signature/Incorporator Date

15 HAR -9 PH I2: 12

NEONETARY OF STATE
LAND MILESSEE FROMON