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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	······································
(Cit	ry/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE
DIVISION OF CORPORATION

N 09/23/15

COVER LETTER

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

SUBJECT: A-1 Ext	terior Maintenance, Inc.		
Sobblet:	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	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	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUI	
FROM: A-	l Exterior Maintenance, Inc.	e (Printed or typed)	<u>-</u>
129	1 SW 116 Ave		
		Address	
Dav	vie, FL 33325		
	City,	State & Zip	
954	-736-6317		
	Daytime T	elephone number	
shin	nko100@gmail.com		

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

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

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

The name of the corpora	A-1 Exterior Maintena	ance, Inc.			
ARTICLE II PRING	CIPAL OFFICE Principal street address		Mailing address, if different is:		
1291 SW 116 Ave					
Davie, FL 33325					
ARTICLE III PURP The purpose for which	OSE the corporation is organized is:	and all lawful busin	ess		
				15 SEP	SEC
			-	-	98 98 98 97
	V				RY CO
 				- -	RY OF SIA CORPORAL
<u> </u>			· · · · · · · · · · · · · · · · · · ·		<u> 존개</u> 중구
ARTICLE V INITIAL Name and Title	AL OFFICERS AND/OR DIRECT(Timothey Shimko President		Title:		
Address	1291 SW 116 Ave	Address:			
	Davie, FL 33325			 ,	
Name and Title	:	Name and	Title:		
Address					
Name and Title	·	Name and	Title:		
Address		Address:			· · · · · · · · · · · · · · · · · ·
		III. III. III. III. III. III. III. III			

Name a	nd Title:	Name and Title:	
Addres	s	Address:	
	, i		
	REGISTERED AGENT		
The <u>name and F</u> Name:	Florida street address (P.O. Box NOT acc Timothey Shimko	eptable) of the registered agent is:	
Address:	1291 SW 116 Ave	·	
	Davie, FL 33325		
ARTICLE VII	<u>INCORPORATOR</u>		SEC DIVISIO 15 SI
The <u>name and a</u>	ddress of the Incorporator is:		SION O
Name:	Timothey Shimko		F COR
Address:	1291 SW 116 Ave		OF STALL RPORATION
	Davie, FL 33325		5
Effective date, if (If an effective days after the fine the Note: If the date	iling.)	and cannot be more than five business day applicable statutory filing requirements, this	•
Having been nathis certificate, I	med as registered agent to accept service am familiar with and accept the appointm	of process for the above stated corporation tent as registered agent and agree to act in t	at the place designated in this capacity
	Required Signature/Registered	Agent	Date
I submit this do	cument and affirm that the facts stated h Department of State constitutes a third de	erein are true. I am aware that the false in gree felony as provided for in s.817.155, F.S.	nformation submitted in a S.
		· ·	9/10/15
Reau	ited Signature/Incorporator		Date