

P1600000ZZ059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

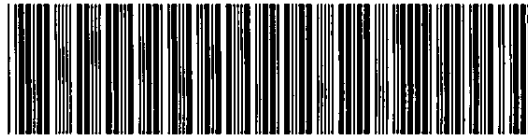
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16 MAR 11 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 11 2016

S. PRATHER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 7, 2016

AARON ECKMAN
6737 GASPARILLA PINES BLVD
ENGLEWOOD, FL 34224

SUBJECT: RELIABLE SERVICES INC.
Ref. Number: W16000016899

We have received your document for RELIABLE SERVICES INC. 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return 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.

Stacy Prather
Regulatory Specialist III

Letter Number: 816A00004666

COVER LETTER

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

SUBJECT: A & K INSPECTIONS INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE STATE)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$79.75
Filing Fee
& Certificate of Status

☐ \$79.75
Filing Fee
& Certified Copy

☐ \$97.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Aaron Eckman
Name (Printed or typed)

6737 Gasparilla Pines Blvd
Address

Englewood Florida 34224
City, State & Zip

612-209-2010
Daytime Telephone number

~~aaeckman~~ aaeckman@gmail.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 & K INSPECTIONS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

6737 Gasparilla Pines Blvd
Englewood Florida
34224

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO provide services for
Profit.

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Jaron Ekman President/CEO

Name and Title:

Address

6737 Gasparilla Pines
BLVD.
Englewood Florida 34224

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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TALLAHASSEE, FLORIDA

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: Claron Eckman
Address: 6737 Gasparilla Pines Blvd
Englewood Florida 34224

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Claron Eckman
Address: 6737 Gasparilla Pines Blvd
Englewood Florida 34224

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TALLAHASSEE, FLORIDA


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above named corporation at the point 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

3-10-2016
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

3-10-2016
Date