

PI6000049205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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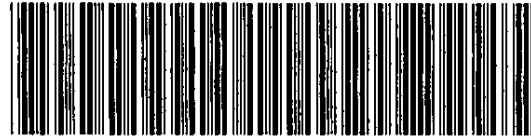
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/31/16--01040--018 \*\*70.00

FILED  
16 MAY 31 PM 4:21  
FBI - LOS ANGELES

JUN 6 2016

S. GILBERT

## COVER LETTER

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

**SUBJECT:** AIR ENVIRONMENTAL ENGINEERING, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** THOMAS JOHN  
\_\_\_\_\_  
Name (Printed or typed)

422 CLAY PITTS RD  
\_\_\_\_\_  
Address

EAST NORTHPORT, NY 11731  
\_\_\_\_\_  
City, State & Zip

631 897-4399  
\_\_\_\_\_  
Daytime Telephone number

bajicda@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: AIR ENVIRONMENTAL ENGINEERING, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

422 CLAY PITTS RD

EAST NORTHPORT, NY 11731

Mailing address, if different is:

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ALLIANCE STATE  
FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: TO ENGAGE IN BUSINESS RELATED TO AIR POLLUTION

SOURCES IN THE STATE. WE WILL HELP COMPANIES TO OBTAIN NECESSARY AIR PERMITS FROM

GOVERNMENT AGENCIES FOR AIR POLLUTION SOURCES AND MAINTAIN COMPLIANCE WITH

REGULATIONS. HELP OBTAINING OTHER ENVIRONMENTAL PERMITS AS WELL.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: THOMAS JOHN, PRESIDENT

Name and Title: \_\_\_\_\_

Address 422 CLAY PITTS RD

Address: \_\_\_\_\_

EAST NORTHPORT, NY 11731

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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: THOMAS SAMUEL \_\_\_\_\_

Address: 16256 NW 13TH ST \_\_\_\_\_

PEMBROKE PINES, FL 33028 \_\_\_\_\_

**ARTICLE VII INCORPORATOR**

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

Name: THOMAS JOHN \_\_\_\_\_

Address: 422 CLAY PITTS RD \_\_\_\_\_

EAST NORTHPORT, NY 11731 \_\_\_\_\_

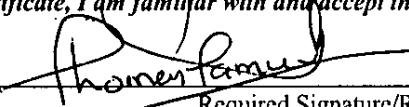
**ARTICLE VIII EFFECTIVE DATE:**

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.)

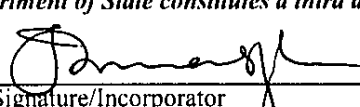
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above 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

05/18/16  
\_\_\_\_\_  
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

5/18/16  
\_\_\_\_\_  
Date