

P 16000066804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

(Business Entity Name)

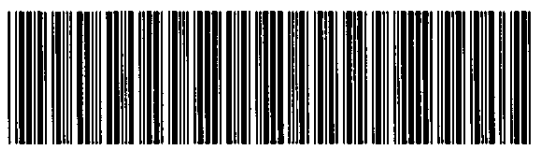
(Document Number)

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

Special Instructions to Filing Officer:  
Letter to Release  
Enclosed  
SJ

Office Use Only

W 16-49479



800287513888

07/06/16--01010--012 \*\*70.00

FILED  
16 AUG -5 11:21:00  
FBI - NEW YORK



RECEIVED

16 AUG -5 PM 3:47

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 18, 2016

THEODORE N. TIEMEYER  
296 CABANA POINT CIR STE 101  
STUART, FL 34994

SUBJECT: A1A CONTRACTING, INC.  
Ref. Number: W16000049479

We have received your document for A1A CONTRACTING, INC. and your check(s) totaling \$70.00. 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 a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The document number of the name conflict is P06000067286 - A1A CONTRACTING INC.

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.

Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section

Letter Number: 216A00014935

## COVER LETTER

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

**SUBJECT:** A1A Contracting, 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:** Theodore N. Tiemeyer

\_\_\_\_\_  
Name (Printed or typed)

296 Cabana Point Cir Ste 101

\_\_\_\_\_  
Address

Stuart, FL 34994

\_\_\_\_\_  
City, State & Zip

772-220-1802

\_\_\_\_\_  
Daytime Telephone number

psminc296@aol.com

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

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

July 26, 2016

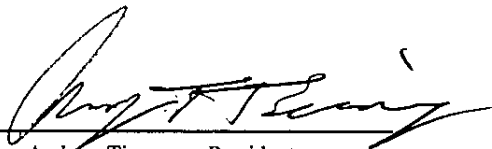
Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: A1A Contracting, Inc. – Document No. P06000067286

To Whom it May Concern,

Please allow this letter to serve as notice that we, the members of A1A Contracting, Inc., have no intention of revoking the dissolution and thereby release the name A1A Contracting, Inc. for use to another entity.

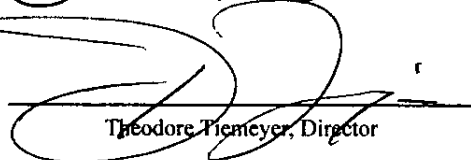
Respectfully,

  
\_\_\_\_\_  
Andrew Tiemeyer, President

7/27/14  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Darren Tiemeyer, Vice President

7/27/16  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Theodore Tiemeyer, Director

7/27/14  
\_\_\_\_\_  
Date

**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: A1A Contracting, Inc.

FILED  
16 AUG - 5 PM 12:00

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is: STATE OF FLORIDA

296 Cabana Point Cir Ste 101

Stuart, FL 34994

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Construction

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Theodore N. Tiemeyer, President

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

Address 296 Cabana Point Cir Ste 101

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

Stuart, FL 34994

Name and Title: Patricia A. Tiemeyer, Treasurer

Name and Title: Patricia A. Tiemeyer, Secretary

Address 296 Cabana Point Cir Ste 101

Address: 296 Cabana Point Cir Ste 101

Stuart, FL 34994

Stuart, FL 34994

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: Theodore N. Tiemyer

Address: 296 Cabana Point Cir Ste 101

Stuart, FL 34994

**ARTICLE VII INCORPORATOR**

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

Name: Theodore N. Tiemyer

Address: 296 Cabana Point Cir Ste 101

Stuart, FL 34994

**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

6-30-2016  
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

6-30-2016  
Date