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CLERK OF STATE
TALLAHASSEE, FLORIDA

V HERRING
NOV 14 2016

COVER LETTER

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

SUBJECT: AFS Fire Systems West, 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 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 REQUIRED

FROM: Andrew Kominik

Name (Printed or typed)

11355 113th Avenue

Address

Largo, FL 33778

City, State & Zip

727-729-1579

Daytime Telephone number

andrew@airflowspecialists.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)

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ARTICLE I NAME

The name of the corporation shall be: AFS Fire Systems West, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

11355 113th Avenue

Largo, FL 33778

SEAL OF THE STATE OF FLORIDA
TALLAHASSEE, FLORIDA
Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: pre-engineered fire systems for restaurants

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andrew Kominik, President

Address: 11355 113th Avenue
Largo, FL 33778

Name and Title: Mac Nielsen, Vice-President

Address: 123 South McMullen Booth Drive
#233
Clearwater, FL 33759

Name and Title: James Powers, Vice-President

Address: 317 Triton Court
Indian Harbor Beach, FL 32937

Name and Title: Jeremy Remsen, Vice-President

Address: 14503 68th Street North
Loxahatchee, FL 33470

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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Name and Title: _____ Name and Title: _____
Address _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Andrew Kominik
Address: 11355 113th Avenue
Largo, FL 33778

ARTICLE VII INCORPORATOR

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

Name: Andrew Kominnik
Address: 11355 113th Avenue
Largo, FL 33778

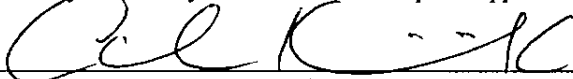
ARTICLE VIII EFFECTIVE DATE:

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

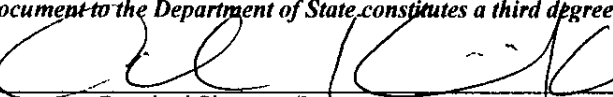


Required Signature/Registered Agent

11/1/2016

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

11/1/2016

Date