

P17000070577

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

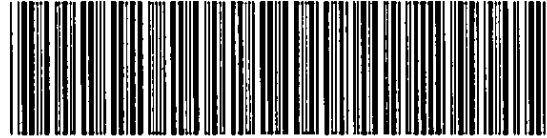
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200302006512

08/04/17--01012--005 **87.50

CLERK OF STATE
TALLAHASSEE, FLORIDA

17 AUG 22 AM 8:17

FILED

08/03/17

W17-064283



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 7, 2017

MARYANN TAYLOR
1680 CYPRESS POINTE DR.
CORAL SPRINGS, FL 33071

SUBJECT: A.R.E.S. AFFORDABLE RESIDENTIAL EXTERIOR SPECIALISTS
CORP
Ref. Number: W17000064283

We have received your document for A.R.E.S. AFFORDABLE RESIDENTIAL EXTERIOR SPECIALISTS CORP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 217A00015943

RECEIVED
17 AUG 22 PM 12:26
DIVISION OF CORPORATIONS
INFORMATION SERVICES

COVER LETTER

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

SUBJECT: A.R.E.S. Affordable Residential Exterior Specialists Corp

(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: MaryAnn Taylor

Name (Printed or typed)

1680 Cypress Pointe Drive

Address

Coral Springs FL 33071

City, State & Zip

954-913-6156

Daytime Telephone number

messagecares@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: Affordable Residential Exterior Specialists Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9863 Riversie Drive

Coral Springs FL 33071

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FILED
17 AUG 22 AM 8:17
CLERK OF DISTRICT COURT
STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dillon Muto P

Name and Title: Jaclyn Muto V

Address 9863 Riverside Drive

Address: 9863 Riverside Drive

Coral Springs FL 33071

Coral Springs FL 33071

Name and Title: MaryAnn Taylor T

Name and Title:

Address 1680 Cypress Pointe Drive

Address:

Coral Springs FL 33071

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: MaryAnn Taylor
Address: 1680 Cypress Pointe Drive
Coral Springs FL 33071

17 AUG 22 AM 8:17
JUL 11 2017
STATE
FALL VILLAGE FLORIDA

ARTICLE VII INCORPORATOR

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

Name: MaryAnn Taylor
Address: 1680 Cypress Pointe Drive
Coral Springs FL 33071

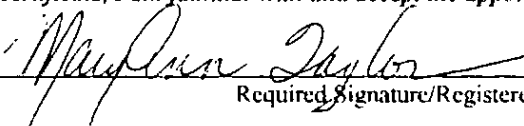
ARTICLE VIII EFFECTIVE DATE:

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 days prior or 90 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

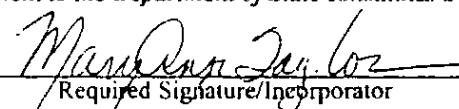


Required Signature/Registered Agent

8/15/2017

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

8/15/2017

Date