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(F	Requestor's Name)				
(Address)					
· (Address)					
(0	City/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(F	Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					

Office Use Only



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TSCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CASSELBERRY A&	S INC			
				
				
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
		Ì		Dissolution / Withdrawal
		ł		Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
	_			Vehicle Search
				Driving Record
Requested by: Seth	02/07/19			UCC 1 or 3 File
Name	Date	Time		UCC 11 Search
M7-11- 7				UCC 11 Retrieval
Walk-In Thomsever, GA 8/00	Will Pick Up			Courier

COVER LETTER

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

SUBJECT: CASSELBERRY A&S	INC
(PROPOSED CORPOR)	TE NAME - MUST INCLUDE SUFFIX)
Enclosed are an original and one (1) copy of the art	icles of incorporation and a check for:
\$70.00 S78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate o Status
	ADDITIONAL COPY REQUIRED
FROM: AHSAN UDDIN_	
Nam	e (Printed or typed)
4265 US HWY17 92	
	Address
CASSELBERRY, FLOF	RIDA 32707 State & Zip
407-300-8494 Daytime T	Celephone number
•	AIL.COM

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)

The name of the corp	VAME CASSELBERRY A&S oration shall be:	SINC	
42	PRINCIPAL OFFICE Principal street address 65 US Hレイソバフタ2 SSELBERRY, FLORIDA 32707	600 RINEHART	dress, if different is: ROAD, SUITE 2008, ORIDA 32746
ARTICLE III Portion of the purpose for white ANYTHING LE	ch the corporation is organized is:		
ARTICLE IV S The number of shares ARTICLE V I	s of stock is:1000 NITIAL OFFICERS AND/OR DIRECTS	ORS	
Name and Title Address:	AHSAN UDDIN P./T. 4265 US HWY17 92. CASSELBERRY, FLORIDA 3270	Name and Title: <u>SHANA</u> Address: <u>4265 U</u>	JAKTHER V.P./S. SHWY1792. LBERRY, FLORIDA 32707
Name and Title Address:		Address:	
Name and Title Address:		Address:	7. 3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	EGISTERED AGENT In street address (P.O. Box NOT acceptable HERMAN SINGH 600 RINEHART ROAD, SUITE: LAKE MARY, ELORIDA 32746	 2008	EB-7 AMIDA HASSES STORES
	NCORPORATOR SS of the Incorporator is: HERMAN SINGH 600 RINEHART ROAD, SUITE 2 LAKE MARY, ELORIDA 32746		OF 47
Having been named this certificate, I am f	as registered agent to accept service of procuminar with and accept the appointment as i	cess for the above stated corpor registered agent and agree to act	in this capacity
· · · · · · · · · · · · · · · · · · ·	No. 16:		02/07/2019
	Required Signature/Registered Agent		Date
I submit this docume document to the Depo	ent and affirm that the facts stated herein a wintend of State constitutes a third degree fel	we true. I am aware that the followy as provided for in \$.817.155	, F.S.
	1 W		02/07/2019
	Required Signature/Incorporator		Date