Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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C RICO MAR 1 0 2020

From:

Account Name : HUBCO

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FLORIDA PROFIT/NON PROFIT CORPORATION A & E MANAGEMENT AND CONSULTING INC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

A & E MANAGEMENT AND CONSULTING INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1205 SW ROBYS WAY PALM CITY, FL 34990

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ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RICHARD MARTINEZ 1205 SW ROBYS WAY PALM CITY, FL 34990

1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

RICHARD MARTINEZ- PRESIDENT/ DIRECTOR 1205 SW ROBYS WAY PALM CITY, FL 34990

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

RICHARD MARTINEZ 1205 SW ROBYS WAY, PALM CITY, FL 34990

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

3RD day of MARCH 20 20

RICHARD MARTINEZ

Signature

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: A	& E MANAGEMENT AND CONSULTING INC	
2. The name and address of the registere	ed agent and office is:	
	RICHARD MARTINEZ	
	Name	
	1205 SW ROBYS WAY	
	(P.O. Box or Mail Drop Box NOT Acceptable)	
PALM CITY, FL 34990		
	(City / State / Zip)	
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.		
RICHARD MARTINEZ SIGNATURE	3/3/2020 (Date)	