## P25000001309 429

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	
<u>.</u> .		

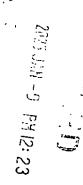
Office Use Only



000440542860

01/09/25--01001--013 /7125.00

2025 JAH -9 PM 12: 02



## **COVER LETTER**

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

SUBJECT: A & H mechanic						
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)						
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:						
<i>A</i> <b>W</b>						
□ \$70.00 \$2.78.75	□ \$ <b>7</b> 8.75	<b>×</b> \$87.50				
Filing Fee Filing Fee	Filing Fee	Filing Fee.				
& Certificate of Status	& Certified Copy	Certified Copy				
		& Certificate of				
		Status				
	ADDITIONAL COPY REQUIRED					

FROM:	Zare C Sherman Correct Name (Printed or typed)
	Name (Printed or typed)
_	1812 pw 3rd St
	Address
	CCOLC FC 34475 City. State & Zip
	City, State & Zip
	352-230-0859
•	Daytime Telephone number
_	Zarkzzssqyahov.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 1 NAME  The name of the corporation shall be: $A \in H$ $\gamma$	nechanical INC
ARTICLE II PRINCIPAL OFFICE  Principal street address  STURVE  COLOR FOR SULLY I	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	: Mechanic, fixing ons
	2015 JA!! -
ARTICLE IV SHARES The number of shares of stock is:	S - 27 - 27 - 27 - 27 - 27 - 27 - 27 - 2
	w (P) Name and Title:
Address 1812 No 3rd 9	
Name and Title:	Name and Title:
Address	Address:
Name and Title:	Name and Title:
Address	Address:

Name an	d Title:	Name and Title:	<del>.</del>
Address		Address:	
	<u>REGISTERED AGENT</u>   <mark>orida street address</mark> (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Zorek Sherman		
Address:	1912 NW 3rd St	<u></u>	
	Clain Fe 31475		
ARTICLE VII	<u>INCORPORATOR</u>		
The <u>name and ac</u>	ddress of the Incorporator is:		
Name:	Zarek Sherman		2075
Address:	1812 NW 3rd St	_	2025 JAN - 9
	10 yla Fo 34475	<del></del>	
ARTICLE VIII	EFFECTIVE DATE:		PH 12: 2:
Effective date, if	other than the date of filing:late is listed, the date must be specific and can	. (OPTIONAL) anot be more than five days price	
Note: If the date	inserted in this block does not meet the applical		this date will not be listed:
the document's e	ffective date on the Department of State's record	ls.	
	ned as registered agent to accept service of proces familiar with and accept the appointment as regis		
Zow	Required Signature/Registered Agent		1 9 2 5 Date
I submit this doc	rument and affirm that the facts stated herein a	re true. I am aware that the fals	se information submitted in
	Department of State constitutes a third degree fel		1.9.25
			— —