P98000075716

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

SUBJECT:	AMMAR (Proposed corpora	ate name - must include suff	ix)	ES, INC.
	Ammaro E	ENTERPRISES	, ZNC.	
Enclosed is an original	l and one(1) copy of the articles		00002626: -08/27/980 *****78.75 heck for:	5893 1044012 *****78.75
\$70.00 Filing Fee	Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	8801 5	Anburginted or typed)	ier Avenus	ROAD
	OCALA.	Address State & Zip	4480	·
In I Mr.	352 - 8	54-166 elephone number	TALLAHAS	98 AUG 27
A/3/10/8			RY OF STATE SEE, FLORID,	FLED
			- 0	

NOTE: Please provide the original and one copy of the articles.

FILED

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ARTICLES OF INCORPORATION

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME
The name of the corporation shall be:
AMMARO, ENTERPRISES, INC.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be: 8801 5 E
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
Joyce Hanburger 8801 SEDA AVERD OCALA, FI 34480
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
BARRY HAMBURGER AVERD
OGALA, F1 34480
1 day in 8-27-98
Signature/Incorporator Date

(An additional article must be added if an effective date is requested.)

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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

Date