

POS000011703

(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



200044088192

01/18/05--01020--025 *\$87.50

RECEIVED
05 JAN 18 PM 1:57
SECRETARY OF STATE
FBI 1505 1500 1500

TH 1/24/05

TRANSMITTAL LETTER

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

SUBJECT: ALL-CELL ACCESSORIES INC.
(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
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: All-Cell Accessories, Inc
Name (Printed or typed)

% Joseph Thomas
Address

16931 W. Alan Black
City, State & Zip

Loxahatchee, FL 33470
Daytime Telephone number

561-436-8302

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)

FILED

05 JAN 18 PM 1:58

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

All Cell Accessories, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

10300 W. Forest Hill Blvd - Rm 107
Wellington, FL 33414

Mail to:
16931 W. Alan Blvd
Loxahatchee FL
33470

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Cellular Telephone Accessory Sales

ARTICLE IV SHARES

The number of shares of stock is:

100 - One Hundred

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Joseph Thomas
16931 W. Alan Blvd
Loxahatchee, FL 33470
President

Brittany Fraska
16934 Temple Blvd
Loxahatchee, FL 33470
V. Pres. / Treas.

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Debbie Mendelsohn
16192-73 Ct N
Loxahatchee, FL 33470

ARTICLE VII INCORPORATOR

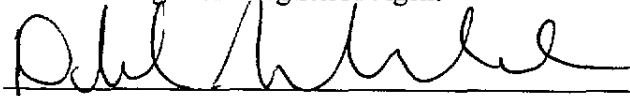
The name and address of the Incorporator is:

Debbie Mendelsohn
16192-73 Ct N
Loxahatchee, FL 33470

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


Signature/Registered Agent

1-12-05
Date


Signature/Incorporator

1-12-05
Date