BETTER BUSINESS SERVICES, INC. 1621 EAST HILLCREST STREET ORLANDO, FLORIDA 32803 TELEPHONE (407) 896-2481 FAX (407) 896-2526

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

RE: ALLI & SON, INC.

000002010010--5 -11/20/96--01087--017 \*\*\*\*122.50 \*\*\*\*122.50

Gentlemen:

Sincerely,

Enclosed please find the Articles of Incorporation and my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and fee for Registered Agent designation for the above named corporation.

Rohin Alli RAHIM ALLI

Alli & SON INC

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# ARTICLES OF INCORPORATION

THE STATE OF FLORIDA )

KNOW ALL MEN BY THESE PRESENT:

That the undersigned, natural person(s) of the age of the least eighteen (18) years, acting as Incorporator(s) of a Corporation under the FLORIDA Business Corporation Act, do hereby adopt the following Articles of Incorporation for such Corporation, to wit:

**ARTICLE 1** 

The name of this corporation is ALLI & SON, INC.

ARTICLE II

The period of duration of this Corporation shall be perpetual.

### **ARTICLE III**

The purposes for which this Corporation is organized include all legal purposes for which a Corporation may be organized in FLORIDA.

#### **ARTICLE IV**

The aggregate number of shares which the Corporation shall have the authority to issue is 10,000 shares. The shares shall have a par value of \$1.00.

#### ARTICLE V

The Corporation will not commence business until it has received for issuance of its shares consideration of the value of \$1,000.00.

## ARTICLE VI

The street address of the registered office, and principal office of the Corporation is 222 NORTH HIAWASSEE ROAD, APT 46, ORLANDO, FL 32835 and the name of the registered agent at said address is RAHIM ALLI.

I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation.

Rahim Alli

**ARTICLE VII** 

SECULTARY OF STAT

The number of directors constituting the initial Board of Directors of this Corporation is ONE and the name(s) and address(es) of the person(s) who are to serve as director(s) until the first annual meeting of the shareholders, or until their successors are elected and qualified, are as follows:

NAME

**ADDRESS** 

**RAHIM ALLI** 

222 NORTH HIAWASSEE ROAD, APT 46 ORLANDO, FL 32835

The name(s) and address(es) of the incorporator(s) are as follows:

**NAME** 

**ADDRESS** 

RAHIM ALLI

222 NORTH HIAWASSEE ROAD, APT 46 ORLANDO, FL 32835

WITNESS MY HAND this the 1ST day of OCTOBER, 1996

RAHIM ALLI INCORPORATOR THE STATE OF FLORIDA )
COUNTY OF ORANGE )

Before me, the undersigned authority, on this day personally appeared RAHIM ALLI, known to me to be the person(s) whose name (s) are subscribed to the foregoing instrument and, being by me first duly sworn severally declares that they are the person(s) who signed the foregoing document as Incorporator(s) and that the statements contained therein are true.

IN WITNESS WHEREOF, I hereunto set my hand and affix my official seal in the state and county aforesaid this the 1ST day of OCTOBER, 1996.

Lillan C. Coy

Notary Public

Orange County, Florida

Commission expires 3/31/00



96 NOV 20 AM 9: 57
SECRETARY OF STATE
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