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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(dusiness Entity Name)
(Document Number)
(Boodine (Maniper)
Certified Copies Certificates of Status
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SECHILLANY OF STATE
TALLAHASSEE, FLORIDA

12/00/

COVER LETTER

FO: Registration Section Division of Corporations	
SUBJECT: All stor Rentals, Inc. (Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
David Desaulniers (Name of Person)	
All star Rentals, Two (Firm/Company)	
(Firm/Company)	
7450 49th ST N. AGG 8	
	- [
Pinellas Park, F1 33781 (City/State and Zip code)	=
\$ ' · · · · · · · · · · · · · · · · · ·	I
For further information concerning this matter, please call:	ب
David Desaulniers 21 (727) 541-3645	
(Name of Person) (Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\bigcup \\$78.75 Filing Fee & \bigcup \\$78.75 Filing Fee & \bigcup \\$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status Certified Copy	定

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Allstar Reals Free (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"

"Inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")	
Allsta (If name unavails	Cent to Own ble in Florida, enter alternate corporate na	me adopted for the purpose of transacting business in Florida)
(State or country	under the law of which it is incorporated)	3. 35-214 8795 (FEI number, if applicable)
4		5. Per pelus (Duration: Year corp. will cease to exist or "perpetual")
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6		
	(Date first transacted busines (SEE SECTIONS 607.1501 & 607.	is in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)
7. 740		
//9	(Principal office a	Inellas Park, Fl 33781 address)
	SAME	
	(Current mailing a	(ddress)
8. Re-	of corporation authorized in home state of	r country to be carried out in state of Florids
9. Name and stree	t address of Florida registered agent: (P.O. Box NOT acceptable)
Name:	David Desaulniers	ILE 327 ARY G SSEE
Office Address:	7450 49th St N	
	Pinellas Puk (City)	, Florida 33 781

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Rychard Falls
Address: 107 5. Hart ST
Princeton, In 47670
Vice President: David Desaulniers
Address: 812 Forest Glen Rd
Clearwaten, Fl 33765
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13.
(Signature of Director or Officer listed in number 12 of the application)
14. Describer V- Pages (Typed or printed name and capacity of person signing application)

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

ALLSTAR RENTALS, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on August 29, 2001, and was in existence or authorized to transact business in the State of Indiana on December 21, 2005.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Twenty-First Day of December, 2005.

TODD ROKITA, Secretary of State

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