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(Re	equestor's Name)	
(Ad	idress)	
(Ac	ldress)	
(Cid	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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K.SALY EXAMINER FEB 10

COVER LETTER

TO:	Registration Division of C					
SUR	JECT:	ALL OV	ER JANITOF	IIAL SE	RVICES, INC.	
SOB	<u></u>	Name	of corporati	on - mu	st include suffix	
Dear :	Sir or Madam:					
"Cert	ificate of Existe	cation by Foreign C nce," or "Certificat eign corporation to	e of Good St	anding"	and check are sub	ct Business in Florida," omitted to register the
Please	e return all corre	espondence concern	ing this mat	er to the	e following:	
		•	Kleasa L.	Boozer	•	
			Name o	f Perso	n	
			All Over Janit	orial Ser	vices, Inc.	
			Firm/Co	mpany		
		1	125 Corporate	Dr. N.	Suite 207B	
			Ado	lress		
			Mobile,	AL 3660	07	
			City/State	and Zij	o code	
			AOBSINC@			
		E-mail addres	s: (to be use	for fut	ure annual report r	notification)
For fu	rther information	on concerning this r	natter, please	e call:		
	Kleasa L. Boo	ozer	251	,	450-2302	
	Name of Per	son	at (ode	Daytime Telep	hone Number
Engls	Registration of Colifton Build 2661 Execution Tallahassee,	Corporations ing ve Center Circle FL 32301			MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
	0.00 Filing Fee	or the following am \$78.75 Filir Certificate	ig Fee &		.75 Filing Fee & tified Copy	□ \$87.50 Filing Fee, Certificate of Status of Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO

(Enter name of c "Inc.," "Co.," "C	orporation; must include "INCORPORATED," "orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"	,
(If name unavaile	able in Florida, enter alternate corporate name add	pted for the purpose of transacting	business in Florida)
Alabama		-2245491	
	y under the law of which it is incorporated)	(FEI number, if appl	icable)
3/18/08	5		
(Date	of incorporation) 5	(Date of duration, if other th	nan perpetual)
10/15/15			
1125 N. Corporat	(Date first transacted business in Fl (SEE SECTIONS 607.1501 & 607.1502 e Drive, Ste 207B, Mobile, AL 36607		·)
1125 N. Corporat	(SEE SECTIONS 607.1501 & 607.1502 e Drive, Ste 207B, Mobile, AL 36607		·)
. 1125 N. Corporat	(SEE SECTIONS 607.1501 & 607.1502 e Drive, Ste 207B, Mobile, AL 36607 (Principal	, F.S., to determine penalty liability	2016 F
. Name and stree	(SEE SECTIONS 607.1501 & 607.1502 e Drive, Ste 207B, Mobile, AL 36607 (Principal	F.S., to determine penalty liability office address)	2016 FEB -8
. Name and stree	(SEE SECTIONS 607.1501 & 607.1502 e Drive, Ste 207B, Mobile, AL 36607 (Principal (Current mailing a et address of Florida registered agent: (P.O. I	F.S., to determine penalty liability office address)	2016 FEB -8 PM
. Name and stree	(SEE SECTIONS 607.1501 & 607.1502 e Drive, Ste 207B, Mobile, AL 36607 (Principal (Current mailing a et address of Florida registered agent: (P.O. I Nicky Jittan	F.S., to determine penalty liability office address)	2016 FEB -8

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.

10. 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: ___ Address: _____ Address: __ Director: **B. OFFICERS** Kleasa L. Boozer President: 1908 Foxfire Road Address: __ Mobile, AL 36618 Charles M. Boozer Vice President: 1908 Foxfire Road Address: _ Mobile, AL 36618 Secretary: _ Address: _ Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Kleasa L. Boozer, President

(Typed or printed name and capacity of person signing application)

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that All Over Janitorial Services, Inc. was formed in Chilton County, Alabama on March 21, 2008. The Alabama Entity Identification number for this entity is 256-607. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.





20160127000021810

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

1/27/2016

Date

J. W. Menill

John H. Merrill

Secretary of State