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Requester's Name

DR. JAY LIEBMAN
P.O. Box 3661
Hollandale, FL 33008

FILED

00 JAN 18 PM 1:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

305)957-9849

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. ALL MOBILE EQUIPMENT CORP.
(Corporation Name) (Document #)

2. 200003074312--2
(Corporation Name) (Document #) -12/17/99--01073--014
*****70.00 *****70.00

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

December 22, 1999

JAY LIEBMAN
3732 NE 167TH ST
N MIAMI BEACH, FL 33160

SUBJECT: ALL MOBILE EQUIPMENT CORP.
Ref. Number: W99000029142

We have received your document for ALL MOBILE EQUIPMENT CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to section 607.0202(1)(b) or 617.0202(1)(b), Florida Statutes, you must list the corporation's principal office, and if different, a mailing address in the document. If the principal address and the registered office address are the same, please indicate so in your document.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

to *you CAN REACH US AT 305-957-9949 FAX: 305-957-9964*
Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6915.

Pamela Hall
Document Specialist

Letter Number: 999A00059849

*As per conversation, I added the
principal address on the documents.*

ARTICLES OF INCORPORATION

ALL MOBILE EQUIPMENT CORP.

FILED

Principal Address: P.O. BOX 3661, HALLANDALE, FL 33008
The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - CORPORATE NAME

The name of the corporation is:

ALL MOBILE EQUIPMENT CORP.

Principal Address: P.O. BOX 3661, HALLANDALE, FL 33008

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue Five hundred shares (500) of ONE Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agent of this Corporation is:

NAME	<u>JAY LIEBMAN</u>		
ADDRESS	<u>3732 NE 167ST</u>		
CITY	<u>N. MIAMI BEACH</u>	FLORIDA	ZIP <u>33160</u>

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have Two (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>ANDREA ROSEN LIEBMAN</u>		
ADDRESS	<u>3732 NE 167ST</u>		
CITY	<u>N. MIAMI BEACH, FLA</u>	STATE <u>FLA</u>	ZIP <u>33160</u>
NAME	<u>JAY LIEBMAN</u>		
ADDRESS	<u>3732 NE 167ST</u>		
CITY	<u>N. MIAMI BEACH</u>	STATE <u>FLA</u>	ZIP <u>33160</u>
NAME			
ADDRESS			
CITY		STATE	ZIP

ARTICLE VII - INCORPORATORS

The names and addresses of the person(s) signing these Articles of Incorporation are as follows:

NAME	JAY LIEBMAN		
ADDRESS	3732 NE 167ST.		
CITY	N. MIAMI BEACH	STATE	FLA.
		ZIP	33160
NAME	ANDREA ROSEN LIEBMAN		
ADDRESS	3732 NE 167ST.		
CITY	N. MIAMI BEACH	STATE	FLA.
		ZIP	33160
NAME			
ADDRESS			
CITY		STATE	
		ZIP	

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 21
day of Nov., 1999.

Jay Lieberman (Seal)
 Andrea Rosen Lieberman (Seal)
 (Seal)

STATE OF FLORIDA)
COUNTY OF) SS

before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that _____ executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this _____ day of _____, 19____.

(Notary Seal)

(Notary Public, State of Florida at Large)

My Commission expires:

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

FILED

00 JAN 18 PM 1:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ALL MOBILE EQUIPMENT CORP.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.034, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 3732 N.E. 167 ST

N. MIAMI BEACH, FLA 33160

has named JAY LIEBMAN

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Jay Lieberman
(registered agent)