

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

300003098733--0 -01/14/00--01045--004 *****87.50 ******87.50

	All-Out Solutions, 3	inc.		
SUBJECT:	(Proposed corpor	ate name - must include suff	ix)	
	•			
Enclosed is an origina	al and one(1) copy of the article	es 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 CO		
FROM:	Margaret B. LaR Name (Pa	oche rinted or typed)		
	3202 SW Sunset Trace Circle Address			• • •
	Palm City, FL 34990 City, State & Zip			
	City,	Since & Zip	OK TAL	
	561-796-7732	Calanhone number	00 JAN 14 SECRETAR (LLAHASS	
	Daytime 1	elephone number	VIL PM 3: 20 TARY OF STATE ASSEE, FLORIDA	

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

OO JAN 14 PM 3: 20
TALLAHASSEE STATE

ARTICLE I NAME

The name of the corporation shall be:

All-Out Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3202 SW Sunset Trace Circle, Palm City, Florida 34990

<u> ARTICLE III SHARES</u>

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

5000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Margaret B. LaRoche 3202 SW Sunset Trace Circle, Palm City, Florida 34990

ARTICLE V INCORPORATOR

Signature/Incorporator

The name and address of the incorporator to these Articles of Incorporation are:

Margaret B. LaRoche

3202 SW Sunset Trace Circle, Palm City, Florida 34990

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent

Date

Date