

00 SEP 20 PM 12: 48

TALLAHASSEE, FLORIDA

Department of State Division of Corporations P.O. Box 6327

Tallahassee, FL 32314 *****70.00 *****70.00 SUBJECT: Allstate Backflow Co., Inc. (proposed corporate name) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$78.75 Filing Fee X \$70.00 Filing Fee \$122.50 \$131.25 & Certificate Filing Fee, Filing Fee Certified Copy & Certified Copy & Certificate

FROM	Joshua J. Pando			
	1700 Artesia Avenue			
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	407-402-0769		_	

ARTICLES OF INCORPORATION OF ALLSTATE BACKFLOW CO., INC.

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00 SEP 20 PM 12: 49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be:

Allstate Backflow Co., Inc.

ARTICLE II PRINCIPAL OFFICE

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

1700 Artesia Avenue Oviedo, FL 32765

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT & STREET ADDRESS
The name and address of the initial registered agent is:

Joshua J. Pando 1700 Artesia Avenue Oviedo, FL 32765

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Joshua J. Pando 590-60-9299 1700 Artesia Avenue Oviedo, FL 32765

Bob Cole 261-17-1449 361 E. 4th st. Chuluota, FL 32766

ARTICLE VI DURATION OF THE CORPORATION

Existence of the Corporation shall commence on the date all fees are paid and these Articles of Incorporation are filed by the Secretary of State and the Corporation shall exist perpetually unless dissolved according to law.

ARTICLE VII INITIAL BOARD OF DIRECTORS

The initial Board of Directors shall consist of two (2) persons. The names and addresses of the persons who shall serve as directors of the Corporation are:

Name	Address	Title
Joshua J. Pando	1700 Artesia Avenue Oviedo, FL 32765	President
Bob Cole	361 E. 4 th Chuluota, FL 32766	Vice President
The undersigned incorporator(s) has(h		orporation this // day of
V September	_, 20 <u>00</u> .	ganu e e e e e e e e e e e e e e e e e e e
Roll	Signature Signature	

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CERTIFICATE OF DESIGNATION OF 00 SEP 20 PM 12: 49 REGISTERED AGENT/REGISTERED OFFICE LIABLE TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

Turner Street and Street Street		
The name and address of the r	egistered agent and office is:	
	Joshua J. Pando	
- · · · · · · · · · · · · · · · · · · ·	(Name)	2 4
	1700 Artesia Avenue	
	(Address)	
	Oviedo, FL 32765	
	(City/State/Zip)	
	I was described account naming of	for the above stated
laving been named as registered	d agent and to accept service of ated in this certificate, I hereb	y accept the appointment as