

PO2000117330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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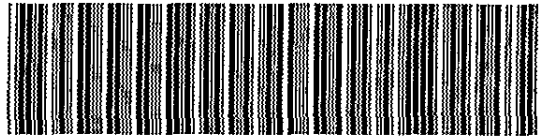
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W02-3058
10/2

TRANSMITTAL LETTER

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

SUBJECT: All Florida Elevator Inspections, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles 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 COPY REQUIRED

FROM: Ordie T. Cornelius
Name (Printed or typed)

233 NW 45th Avenue
Address

Plantation, FL 33317-3125
City, State & Zip

954-792-8060 h/ 954-592-4087 c
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

October 23, 2002

ORDIE T. CORNELIUS
233 NW 45TH AVE.
PLANTATION, FL 33317-3125

SUBJECT: ALL FLORIDA ELEVATOR INSPECTIONS, INC.
Ref. Number: W02000030587

We have received your document for ALL FLORIDA ELEVATOR INSPECTIONS, INC. and your check(s) totaling \$79.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

There can only be one registered agent.

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) 245-6878.

Alan Crum
Document Specialist
New Filing Section

Letter Number: 702A00058649

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

ALL FLORIDA ELEVATOR INSPECTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

233 N.W. 45th Avenue
PLANTATION, FL. 33317-3125

mailling address:

P.O. Box 120581

FL. 33312-0010

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation (profit)

ARTICLE IV SHARES

The number of shares of stock is:

one (1)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Ordie T. Cornelius
233 N.W. 45th Avenue
PLANTATION, FL. 33317-3125

Brigitte Cornelius
and 233 NW 45 Avenue
Plantation, FL
33317-3125

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Ordie T. Cornelius
233 N.W. 45th Avenue
PLANTATION, FL. 33317-3125

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Brigitte Cornelius
233 N.W. 45th Ave
Plantation, Florida 33317-3125

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Ordie T. Cornelius
Signature/Registered Agent

10-26-02
Date

Brigitte Cornelius
Signature/Incorporator

10-26-02
Date