P03000019939

(Requestor's Name)		
(Address)		
(Ac	ddress)	
	·	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nam	e)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



100012223881

02/17/03--01074--009 **78.50

03 FEB 17 PM 2: 32 SECINCIALL OF STATE TALL AHASSEE FLORIDA

The Rothman Law Offices

8814 Rocky Creek Drive Tampa, Florida 33615 Telephone: 813/932-5297 Facsimile: 813/886-6423

Mark A. Rothman

February 12, 2003

Secretary of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32301

Re:

Filing of Articles of Incorporation for

ALLPCONLINE.COM, Inc.

Ladies and Gentlemen:

Enclosed are the Articles of Incorporation for a corporation to be incorporated as ALLPCONLINE.COM, Inc. Enclosed is also check in the amount of \$78.50, representing the filing fee for the enclosed.

If you have any additional questions, please feel free to contact my office.

Sincerely,

Mark A. Rothman, Esquire

MAR/dak

Enclosures

ARTICLES OF INCORPORATION

OF

ALLPCONLINE.COM, INC.

FILED

03 FEB 17 PH 2: 32

SECRETARY UP STATE
TALLAHASSEE, FLORIDA

The undersigned subscriber to these Articles of Incorporation hereby forms a Corporation for profit under the laws of the State of Florida.

ARTICLE I - NAME

The name of the Corporation shall be:

ALLPCONLINE.COM, INC.

ARTICLE II - ADDRESS

The principal address of the corporation shall be:

10357 Lightner Bridge Drive ____ Tampa, FL 33626

ARTICLE III - DURATION

This Corporation shall have perpetual existence.

ARTICLE IV - PURPOSES

The general character or nature of the business to be transacted by this Corporation is to do any and all legal acts as permitted under the laws of the United States and Florida.

ARTICLE V - CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any time is 1000 shares of voting common stock, having no par value.

ARTICLE VI - NAME AND ADDRESS OF INITIAL REGISTERED AGENT

The name and address of its initial Registered Agent is:

NAME

ADDRESS

Fabio Braghi

10357 Lightner Bridge Drive Tampa, FL 33626

ARTICLE VIII - INCORPORATORS

The name and address of the person signing these Articles of Incorporation is:

NAME

ADDRESS

Fabio Braghi

10357 Lightner Bridge Drive Tampa, FL 33626

ARTICLE IX - DATE OF COMMENCEMENT

The date of commencement of corporation existence to commence upon the filing of the Articles herein by the Department of State.

IN WITNESS THEREOF, the undersigned subscriber has executed these Articles of Incorporation this __/Z+L_ day of February, 2003.

Fabio Braghi, Incorporator

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above personally appeared Fabio Braghi and presented *iNs A # 072-896 - 105* as personal identification, who acknowledged to me that he executed these Articles of Incorporation.

Sharon A Greene
My Commission DD065260
Expires October 16, 2005

Notary Public

State of Florida at Large

My Commission Expires: 10/16/2005

DEPARTMENT OF STATE

Certificate designating place of business or domicile for the Service of Process within this State, Naming Agent upon whom Process may be served.

The following is submitted, in compliance with Chapter 48.091, Florida Statues:

ALLPCONLINE.COM, INC. a corporation organized (or organizing) under the laws of the State of Florida with its principal office at 10357 Lightner Bridge Drive, Tampa, FL 33626, County of Hillsborough, State of Florida, and names Fabio Braghi, 10357 Lightner Bridge Drive, Tampa, FL 33626, County of Hillsborough, State of Florida, as its agent to accept service of process with the State.

ACCEPTANCE:

I agree as Registered Agent to accept Service of Process; to keep office open during prescribed hours; to post my name (and that of any other officers of said corporation authorized to accept service of process at the above Florida designated address) in some conspicuous place in the office as required by law.

Fabio Braghi, Registered Agent

Filing Fee: \$35.00

AFFIDAVIT:

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above personally appeared Fabio Braghi and presented <u>JNS A# 072-816-105</u> as personal identification, and who, being duly sworn, deposes and says that he executed the foregoing instrument for the purposes expressed therein.

Sworn to and subscribed before me this $\frac{12^{+1}}{2}$ day of February, 2003.

Sharon A Greene
My Commission DD065260
Expires October 16, 2005

Notary Public

State of Florida at Large

ruon a. Greene

My Commission Expires: /0/16/2005