

P03000056864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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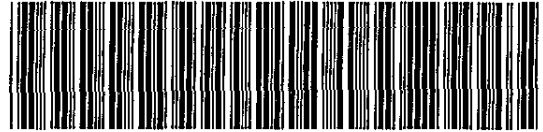
(Business Entity Name)

(Document Number)

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FILED  
03 MAY 15 AM 10:23  
SEC. OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

**SUBJECT:** All-Purpose Solutions, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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:** Sandy Dominguez

Name (Printed or typed)

4163 SW 67th Avunue, Unit #207-C

Address

Davie, Florida 33314

City, State & Zip

786-423-6447

Daytime Telephone number

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

## 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-Purpose Solutions, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 290575  
Davie, Florida 33329-0575

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail/wholesale/software

### ARTICLE IV SHARES

The number of shares of stock is:

1

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Name: Sandy Dominguez  
Address: 4163 SW 67th Avenue, Unit 207-C  
Davie, Florida 33314  
Title: President

### ARTICLE VI REGISTERED AGENT

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

Name: Sandy Dominguez  
Address: 4163 SW 67th Avenue, Unit 207-C  
Davie, Florida 33314

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Sandy Dominguez  
Address: 4163 SW 67th Avenue, Unit 207-C  
Davie, Florida 33314

\*\*\*\*\*  
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

  
\_\_\_\_\_  
Signature/Registered Agent

05/13/2003

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

05/13/2003

\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA