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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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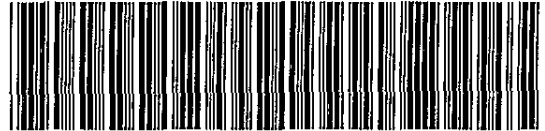
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TS  
9/19/03

## TRANSMITTAL LETTER

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

SUBJECT: Aldrostar USA, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☒ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                            & Certificate of  
                            Status

**ADDITIONAL COPY REQUIRED**

FROM: Aldrostar USA, Inc.  
Name (Printed or typed)

108 Via Capri  
Address

Palm Beach Gardens, FL 33418  
City, State & Zip

954-974-3682  
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:

Aldrostar USA, Inc.

EFFECTIVE DATE  
9/10/03

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

108 Via Capri, Palm Beach Gardens, FL 33418

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Providing Insurance and Reinsurance Consultation Services

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Michael Camilleri, Secretary and Vice President  
John Valko, President and Treasurer

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**ARTICLE VI REGISTERED AGENT**

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

Melinda Green  
2101 Corporate Blvd.  
Suite 415  
Boca Raton, FL 33431

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Melinda Green  
2101 Corporate Blvd.  
Suite 415  
Boca Raton, FL 33431

\*\*\*\*\*

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

Melinda Green  
Signature/Registered Agent

9/10/03  
Date

Melinda Green  
Signature/Incorporator

9/10/03  
Date

Please make effective date: 9/10/03