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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

22-1-03

## TRANSMITTAL LETTER

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

SUBJECT: AltTrans CONSULTING, 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: HENRY A. MCCONNELL  
Name (Printed or typed)

8809 CROSSWOOD CT  
Address

RIVERVIEW, FL 33569  
City, State & Zip

813-677-8897

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)

FILED

**ARTICLE I NAME**

The name of the corporation shall be:

AllTrans CONSULTING, INC.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

8809 CROSSWOOD COURT  
RIVERVIEW, FL 33569

MAILING:

P.O. Box 666  
RIVERVIEW, FL 33569

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

GENERAL BUSINESS CONSULTING ON ALLISON TRANSMISSION  
RELATED ACTIVITIES

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

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

HENRY A. MCCONNELL - PRESIDENT  
8809 CROSSWOOD COURT  
RIVERVIEW, FL 33569

**ARTICLE VI REGISTERED AGENT**

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

HENRY A. MCCONNELL  
8809 CROSSWOOD COURT  
RIVERVIEW, FL 33569

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

HENRY A. MCCONNELL  
8809 CROSSWOOD COURT  
RIVERVIEW, FL 33569

\*\*\*\*\*

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

Henry A. McConnell  
Signature/Registered Agent

11/13/03  
Date

Henry A. McConnell  
Signature/Incorporator

11/13/03  
Date