## 04000053435

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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TALLAHASSEE, FLORIDATE

## TRANSMITTAL LETTER

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

SUBJECT:	All Allianc (PROPOSED CORPORA	e Insurance ATE NAME - MUST INCL	Group III UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status
FROM:		e (Printed or typed)  Address  Fl. 33887  y, State & Zip	up, TT
	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)	FILER
ARTICLE I NAME	• •
The name of the corporation shall be:	04 MAR 22 PM 1:50
The name of the corporation shall be:  All Alliance Trisurance Grup, III. Inc.	SECILE STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
4914. Lake under hill Rd. Orlando +13	<i>ጷ8</i> 07
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
Insurance sales and services	
ARTICLE IV SHARES The number of shares of stock is:  /60	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
David Custillo - President 1727 Teal briar Ave Oviedo, Fl. 32865	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
David Castillo - All Alliance Insurance	
515 No. Semoran Blud. Orlando fl 32	801
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
David Castillo - 1727 Tealbrier Ave a	1 vie do +1.33761-
*******************	******
Having been named as registered agent to accept service of process for the above stated corporation of certificate, I am familiar with and accept the appointment as registered agent and agree to act in this ca	
Signature/Registered Agent	3/10/09
Signature/Registered Agent	Date
Dad Cetres	2/19/04
Signature/Incorporator	Date