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(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(60	isiness Endty Nati	ie)		
(Do	ocument Number)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			





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SECRETARY OF STATE

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TRANSMITTAL LETTER

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

SUBJECT:	Allstate Mechanical Services, Inc.			
	(PROPOSED CORPORA	TE NAME – <u>MÜST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
FROM:		teven Nadler e (Printed or typed)		
	902	N.W. 4th Street Address		
		ville, FL 32601		
		2-376-5221	· · · · · · · · · · · · · · · · · · ·	

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: Allstate Mechanical Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: P.O. Box 358653 Gainesville, FL 32635

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Mechanical 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): Steven Nadler President

ARTICLE VI REGISTERED AGENT

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

Brian K. Shey 6110 N.W. 1st Place Suite A Gainesville, FL 32607

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Steven Nadler 902 N.W. 4th Street Gainesville, FL 32601

Signature/Registered Agent

Signature/Incorporator

3-27-04 Data

Date

Date