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TRANSMITTAL LETTER

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

SUBJECT: Donald Allman, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee
& Designation of
Registered Agent

☐ \$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: Donald Allman, Inc.
Name (Printed or typed)
1634-2 Scholtz Court
Address
Key West, FL 33040
City, State & Zip
(305) 295-0397
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)
of
Donald Allman, Inc.

ARTICLE I – NAME

The name of the corporation shall be:

Donald Allman, Inc.

ARTICLE II – PRINCIPAL OFFICE

The principal place of business/mailing address is:

1634-2 Scholtz Court
Key West, FL 33040

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ARTICLE III – PURPOSE

The purpose for which the corporation is organized is: To transact any business that a corporation may engage in under the laws of the State of Florida.

Consulting

ARTICLE IV - SHARES OF STOCK

The number of shares of stock is:

100 Shares @ \$1 par value

ARTICLE V – INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

Donald Allman, Pres/Sec/Treas
1634-2 Scholtz Court
Key West, FL 33040

ARTICLE VI – REGISTERED AGENT

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

Stephen Simone, CPA
Stephen Simone, P.A.
6439 Central Avenue
St. Petersburg, FL 33710-8411

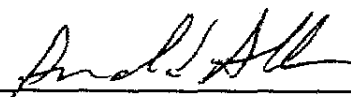
ARTICLE VII – INCORPORATOR

The name and address of the Incorporator is:

Donald Allman, Inc.
1634-2 Scholtz Court
Key West, FL 33040

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

~~11~~ 30 day of April, 20 04.


Name

04/30/04
Date

Name

Date

Name

Date

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida submits the following statement in designating the Registered Office/Registered Agent, in the State of Florida.

1. The name of the Corporation is:

Donald Allman, Inc.

2. The name and address of the registered agent and office is:

Stephen Simone, CPA
Stephen Simone, P.A.
6439 Central Avenue
St. Petersburg, FL 33710-8411

Having been named as Registered Agent and to accept service of process for the above-stated corporation at the place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Signature: _____



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