

P04000147406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

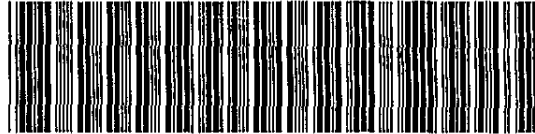
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Douva Sacco GAVE
AUTHORIZATION BY PHONE TO
CORRECT corp. name (inspections)
DATE 10-27-04
DOC. EXAM. QED

Office Use Only



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10/26/04--01031--001 **70.00

FILED
OCT 26 AM 11:51
RECEIVED
TALLAHASSEE, FLORIDA

✓ QED 10-27-04

TRANSMITTAL LETTER

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

SUBJECT: A-1 ALL AROUND BUILDING INSPECTIONS, 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: DONNA SACCO
Name (Printed or typed)

1111 NW 99 TERRACE
Address

PEMBROKE PINES, FL 33024
City, State & Zip

954-680-4818
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:

A-1 ALL AROUND BUILDING INSPECTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5834 DAWSON STREET
HOLLYWOOD, FL 33023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1000 (ONE THOUSAND SHARES)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PHIL MORELLO - PRESIDENT - DIRECTOR

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

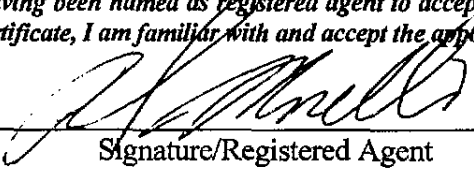
PHIL MORELLO
5834 DAWSON STREET
HOLLYWOOD, FLORIDA 33023

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DONNA SACCO
1111 NW 99 TERRACE
PEMBROKE PINES, FL 33024

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


Signature/Registered Agent


Date


Signature/Incorporator


Date

FILED

04 OCT 25 AM 11:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA