

PO4000154840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

21-37071

TH 11/15/04

## TRANSMITTAL LETTER

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

**SUBJECT:** ALL PRO'S HEATING 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  
Filing Fee

☐ \$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:** HAND -IN-HAND PROFESSIONAL SERVICES

Name (Printed or typed)

1443 N PINE HILLS RD,

Address

ORLANDO FLORIDA, 32808

City, State & Zip

407-295-1888

Daytime Telephone number

**NOTE:** Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

October 7, 2004

HAND IN HAND PROFESSIONAL SERVICES  
1443 N PINE HILLS RD  
ORLANDO, FL 32808

SUBJECT: ALL PRO'S HEATING INC  
Ref. Number: W04000037020

We have received your document for ALL PRO'S HEATING INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated in your document is not an active entity according to our records. Please reinstate this entity (call (850) 245-6059 for information) or designate another entity that is active according to our records.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Document Specialist  
New Filings Section

Letter Number: 804A00058190

04 NOV 15 AM 10 25

RECEIVED

**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:

ALL PRO'S HEATING INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

216 FAIRFIELD DR  
SANFORD,FLORIDA,32771

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ELECTRICAL AND PLUMBING SERVICES

**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):

OMAR. A KHAN  
216 FAIRFIELD DR  
SANFORD,FLORIDA,32771

**ARTICLE VI REGISTERED AGENT**

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

~~HAND IN HAND PROFESSIONAL SERVICES~~ (RONALD KARRAN)  
1443 N. PINE HILLS RD,  
ORLANDO,FLORIDA,32808.

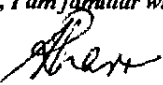
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

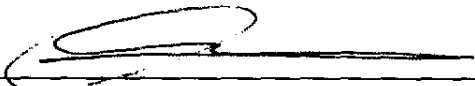
OMAR A KHAN  
216 FAIRFIELD DR  
SANFORD, FL - 32771

\*\*\*\*\*

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

10/01/04  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

10/01/04  
\_\_\_\_\_  
Date

04 NOV 15 AM 11:47  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA