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TRANSMITTAL LETTER

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

2

SUBJECT: <u>ALL-Right Services Inc.</u> (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

5 \$78.75	
Filing Fee	
& Certified Copy	

Status

ADDITIONAL COPY REQUIRED

Carla Patricia Clark Name (Printed or typed) FROM: 8731 NW 16 St. Address Pembroke Pines, FL 33024 City, State & Zip 754-249-6005 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: ALL-Right Services Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 8731 NW 16th St. / P.O. BUX 16513 Penbroke Pines, El 33024 / Plantation, El 33318

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: For-profit corporation

ARTICLE IV SHARES

The number of shares of stock is: /00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):	Carla P. Clark (President)
John E. Clark (CEO)	8021 ALW 16 ST.
	Pembrokke Pines, FL 33024

ARTICLE VI REGISTERED AGENT

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

Jack Clark 6338 SW 231 St. Miraman, FL. 33023

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Carla P. Clark 8731 NW 16th St. 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 Signature/Incorporator

Date -3-05 Date

FILED SECRETARY OF STATE DIVISION OF CORPORATION:

05 AUG 15 PM 3: 59