## P05000143809

| (Red                      | questor's Name)  |             |
|---------------------------|------------------|-------------|
| (Add                      | dress)           |             |
| (Ado                      | fress)           |             |
| (City/State/Zip/Phone #)  |                  |             |
| PICK-UP                   | ☐ WAIT           | MAIL        |
| (Bus                      | iness Entity Nar | me)         |
| (Doc                      | cument Number)   |             |
| Certified Copies          | Certificates     | s of Status |
| Special Instructions to F | iling Officer:   |             |
|                           |                  |             |
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|                           |                  |             |
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SECRETARY OF SME.

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## **COVER LETTER**

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

| SUBJECT: Hallo Services, Inc.  |  |  |
|--|--|--|
| (PROPOSED CORPORA)  Enclosed are an original and one (1) copy of the artic |  |  |
| ₹ \$70.00 \$78.75  Filing Fee Filing Fee & Certificate of Status           | \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO | S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED |
| FROM: Charlet Ann Hallo  |  |  |
| Name (   | (Printed or typed)                                 |  |
| 5595 Rumson Road   | ddress   |  |
| North Port, FL 34288   | State & Zip  |  |
| 941-429-6170   | elephone number                                    |  |
| Dayinne 16   | repriene 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)  | FILED SECRETARY OF STATE TALLAHASSER SLOWDA |
|---|---|
| ARTICLE I NAME The name of the corporation shall be:  | OSOCTOL DATE : -                            |
| •   | 05 OCT 21 PM 12: 47                         |
| Hallo Services, Inc.  |   |
| ARTICLE II PRINCIPAL OFFICE   |   |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:   |   |
| 5595 Rumson Road North Port, FL 34288   |   |
| 3353 Rumson Road North Fort, I E 34200  |   |
| ARTICLE III PURPOSE   |   |
| The purpose for which the corporation is organized is:  |   |
| any legal purposes  |   |
|   |   |
| 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):  |   |
| Charlet Ann Hallo President 5595 Rumson Road North Port, FL 34288 Michael Hallo Vice President 5595 Rumson Road North Port, FL 34288  |   |
| ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered 5595 Rumson Road North Port, FL 34288  UNIVEL ANN HOLD   | agent is:                                   |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is:   |   |
| Charlet Ann Hallo President 5595 Rumson Road North Port, FL 34288   |   |
| ARTICEL VIII EFFECTIVE DATE   |   |
| JANUARY1, 2006  |   |
| ****  | kwaxxxxxxxxxxxxxxxxxxxxxx                   |
| Having been named as registered agent to accept service of process for the above stated corporation certificate, I am familiar with and accept the appointment as registered agent and agree to act in this |   |

Signature/Registered Agent
Charlet Kun Hallo

Signature/Incorporator