

PD 7000036466

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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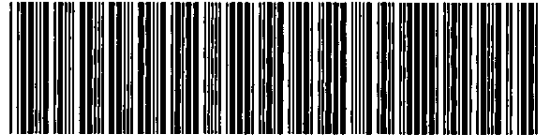
(Business Entity Name)

(Document Number)

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2007 MAR 21 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18.3-22

TRANSMITTAL LETTER

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

SUBJECT: ALL COUNTY GAS, 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: ALL COUNTY GAS, INC.
Name (Printed or typed)

109 S. BROAD STREET
Address

BROOKSVILLE, FL 34601
City, State & Zip

352-796-8511
Daytime Telephone number

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

0.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be:

ALL COUNTY GAS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*709 S. BROAD STREET
BROOKSVILLE, FL 34601*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*ANY LAWFUL BUSINESS, BUT SPECIFICALLY TO OPERATE
A PROPANE GAS SALES BUSINESS.*

ARTICLE IV SHARES

The number of shares of stock is: *500*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*DARIN S. ENGLE, Director + President
3517 Conifer Loop
Spring Hill, FL 34609*

ARTICLE VI REGISTERED AGENT

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

*DARIN S. ENGLE
3517 Conifer Loop
Spring Hill, FL 34609*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*DARIN S. ENGLE
3517 Conifer Loop
Spring Hill, FL 34609*

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

x *Darin S. Engle*

Signature/Registered Agent

x *3/16/2007*

Date

x *Darin S. Engle*

Signature/Incorporator

x *3/16/2007*

Date