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To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : 120000000257 Phone : (850)224-8870

Fax Number : (850)224-7047

07 JUL 18 AM 10: 26

SECRETARY OF STATE

## FLORIDA PROFIT/NON PROFIT CORPORATION

ALLIWIN, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help

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JUL. 18. 2007 2:31PM CAPITAL CONNECTION **H07000183BB3** 3

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NO. 9693 P. 2
EILED SECRETARY OF STATE DIVISION OF CORPORATIONS

07 JUL 18 AM 10: 26

# ARTICLES OF INCORPORATION OF

## ALLIWIN, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I: NAME

The name of the corporation is ALLIWIN, Inc.

### ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 2854 West Rainbow Circle, Sarasota, FL 34231

#### ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (\$1.00) per share. Mr. John R. Irwin will have fifty percent of the shares and Mr. Richard B. Allen will have the other fifty percent of the shares.

H07000183881 3

#### ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Michael F. Kayusa, 1922 Victoria Avenue, Suite A, Fort Myers, FL 33901

#### ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL. 32301.

#### ARTICLE VI: OFFICERS & DIRECTORS

The name and address of the initial Officers and Directors of the corporation are:

John R. Irwin, President/Treasurer, 2854 West Rainbow Circle, Sarasota, FL 34231

Richard B. Allen, Vice President/Secretary, 2854 West Rainbow Circle, Sarasota, FL 34231

The undersigned has executed these Articles of Incorporation this 18th day of July 2007.

"Your Capital Connection, Inc. by, Weimar Lopez, Client Representative"

JUL. 18. 2007 2:31PM CAPITAL CONNECTION #107000183881 3

SECRETARY OF STATE DIVISION OF CORPORATIONS

07 JUL 18 AM 10: 26

#### CERTIFICATE OF DESIGNATION

#### REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: ALLIWIN, Inc.	
2. The n	ame and street address of the registered agent and office is:  Michael F. Kayusa, 1922 Victoria Avenue, Suite A
	Michael F. Kayusa, 1922 victolla Avenue, Suito A

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

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