

PO9000004099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

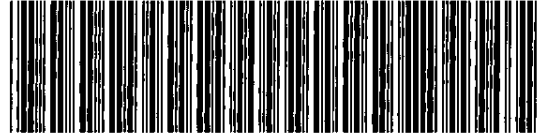
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09 JAN 13 AM 10:30
STATE OF ALABAMA
MONTGOMERY

COVER LETTER

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

SUBJECT: Allison Bradley Co.

(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: Stacey Allison Craig

Name (Printed or typed)

4848 NW 20th Place

Address

Coconut Creek, FL 33063

City, State & Zip

(954) 495-1389

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:

Allison Bradley Co.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

4848 NW 20th Place
Coconut Creek, FL 33063

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide marketing and promotional 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):

Stacey Allison Craig, 4848 NW 20th Place Coconut Creek, FL 33063, President
Stacey Ethridge, 4848 NW 20th Place Coconut Creek, FL 33063, Vice President

ARTICLE VI REGISTERED AGENT

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

Stacey Allison Craig
4848 NW 20th Place
Coconut Creek, FL33063

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Stacey Allison Craig
4848 NW 20th Place
Coconut Creek, FL 33063

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

S. Allison Craig
Signature/Registered Agent

1/10/2009
Date

S. Allison Craig
Signature/Incorporator

1/10/2009
Date

FILED
09 JAN 13 AM 10:30
CLERK OF COUNTY CLERK
DADE COUNTY, FLORIDA

ARTICLE VIII ***Effective Date***

January 10, 2009