# POPOCIO 00 2575

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



700140126067

01/12/09--01007--011 \*\*78.75

SECRETARY OF STATE

2009 JAN 27 PH 1:47

# **COVER LETTER**

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

SUBJECT: AVALO	ON REPORTING, INC.			
	(PROPOSED CORPOR	RATE NAME – <u>MUST INC</u> I	LUDE SUFFIX)	
Enclosed are an ori	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:	
<b>☑</b> \$70.00	\$78.75	\$78.75	<b>387.</b> 50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
rung ree	& Certificate of Status	& Certified Copy	Certified Copy	
	a comment of suitas	La Commod Copy	& Certificate of	
			Status	
	ADDITIONAL COPY REQUIRED			
		<u> </u>		
FROM: A	URORA C. SLOAN	e (Printed or typed)		
	7400	o (i ilitoa di typoa)		
	5625 SW 88 AVENUE		•	
Address				
	COOPER CITY, FLORIDA 333	28		
		y, State & Zip		
	9544349464			
Daytime Telephone number				

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



DEPARTMENT OF STATE
09 JAN 27 AM II: 06

# FLORIDA DEPARTMENT OF STATE Division of Corporations

January 13, 2009

AURORA C. SLOAN 5625 SW 88 AVENUE COOPER CITY, FL 33328

SUBJECT: AVALON REPORTING, INC.

Ref. Number: W0900001709

We have received your document for AVALON REPORTING, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole Regulatory Specialist II

Letter Number: 909A00001227

# 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:

AVALON REPORTING, INC.

# ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: Cooper City, FL 33328

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is: COURT REPORTING

## ARTICLE IV SHARES

The number of shares of stock is: 1500

# INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V

List name(s), address(es) and specific title(s): AURORA C. SLOAN 5625 SW 88 AVENUE

## ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: AURORA C. SLOAN

**5625 SW 88 AVENUE** COOPER CITY, FLORIDA 33328

COOPER CITY, FLORIDA 33328

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: AURORA C. SLOAN 5625 SW 88 AVENUE COOPER CITY, FLORIDA 33328

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, it an familiar with a<u>nd accept th</u>e appointment as registered agent and agree to act in this capacity

entature/Registered Agent

Signature/Incorporator