

PO9000022103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

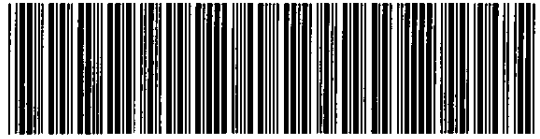
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/25/09--01016--013 **78.75

FILED
09 MAR -9 AM 7:58
RECEIVED
MAR 10 2009

A handwritten signature in black ink, possibly reading 'DAS'.

COVER LETTER

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

SUBJECT: ALL Inclusive Concierge
(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: Natalie Majors
Name (Printed or typed)

17089 NW 11th ST.
Address

Pembroke Pines FL. 33028
City, State & Zip

954-435-0884
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 26, 2009

NATALIE MAJORS
17089 NW 11TH ST
PEMBROKE PINES, FL 33028

SUBJECT: ALL INCLUSIVE CONCIERGE
Ref. Number: W09000009337

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

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The registered agent must sign accepting the designation.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the corrected original and one copy of 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) 245-6052.

Paisley A Alford
Clerk
New Filing Section

Letter Number: 709A00006859

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:

All Inclusive Concierge Inc.

ARTICLE II PRINCIPAL OFFICE

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

17084 NW 11th St.

Pembroke Pines, Florida 33028

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFIT

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):

Natalie Majors, President and COO

ARTICLE VI REGISTERED AGENT

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

Natalie Majors

17084 NW 11th Street

Pembroke Pines, Florida 33028

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Natalie Majors

17084 NW 11th St.

Pembroke Pines, Florida 33028

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

Natalie Majors

Signature/Registered Agent

Natalie Majors

Signature/Incorporator

Date

2/23/09

Date

09 MAR -9 AM 7:58

FILED