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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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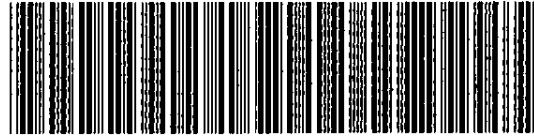
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

nd
1-11-10

COVER LETTER

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

SUBJECT: ALLIED INSURANCE SERVICES 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
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: ALAN JOSEPH

Name (Printed or typed)

8400 N UNIVERSITY DR SUITE 303

Address

TAMARAC, FL 33321

City, State & Zip

954 721 5526

Daytime Telephone number

AJ@ALLIEDINSSERVICES.COM

E-mail address: (to be used for future annual report notification)

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

WAVIER

I Alan Joseph of Allied Insurance Services have dissolved company and never wish to reinstate and I'm releasing the name for use.

Alan Joseph Alan Joseph

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TALLAHASSEE, FLORIDA

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:

ALLIED INSURANCE SERVICES INC

ARTICLE II PRINCIPAL OFFICE

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

8400 N UNIVERSITY DR SUITE 303
TAMARAC, FL 33321

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSURANCE SALES

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ALAN JOSEPH (PRESIDENT)
7812 NW 77 AVE
TAMARAC, FL 33321

ARTICLE VI REGISTERED AGENT

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

ALAN JOSEPH
7812 NW 77 AVE
TAMARAC, FL 33321

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALAN JOSEPH
7812 NW 77 AVE
TAMARAC, FL 33321

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

Alan Joseph

Signature/Registered Agent

1/6/09

Date

Alan Joseph

Signature/Incorporator

1/6/09

Date

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TALLAHASSEE, FLORIDA