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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MPD
7/20

OMNI BUSINESS SERVICES, INC

DBA OMNI INSURANCE SERVICES

2413 BISCAYNE BLVD

MIAMI, FL 33137

Tel:305-576-7755

Fax:305-576-9107

July 14, 2010

Florida Department of State
Division of Corporations
P O BOX 6327
Tallahassee, Florida 32314

Dear Sir or Madam:

Enclosed you will find the Articles of Corporations of ALLSTAR FOOT ACTION, INC
Along with a Money Order in the amount of \$ 78.75. Please register it for me.

Sincerely,


Emmanuel Regis

FILED

ARTICLES OF INCORPORATION
OF
ALLSTAR FOOT ACTION , INC

10 JUL 15 PM 4:45

SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned incorporator hereby make, subscribe, acknowledge and file with the Department of State these Articles for the purpose of forming a Corporation for Profit in accordance with the Laws of the State of Florida.

ARTICLE I-NAME:

The name of this Corporation shall be:

ALLSTAR FOOT ACTION , INC

ARTICLE II-GENERAL NATURE OF BUSINESS:

This Corporation may engage in activity or business peermitted under the laws of the United States of America, and the State of Florida.

ARTICLE III-CAPITAL STOCK:

The maximum number of shares which the Corporation shall have authority to issue is the total sum of:

SHARES	PAR VALUE
100,000	\$ 1.00

Which shall be designated "Common Shares", each of said shares of stock shall entitle the holder thereof to one (1) vote at any meeting of the stockholders. All or any part of said apital Stock my be paid for in cash, in property (other than stock or securities) or in labor or services at a fair valuation to be fixed by the incorporator or by the Board of Directors at a meeting called for such purpose. All stock when issued shall be fully paid for and shall be non-assessable.

ARTICLE IV-TERM OF CORPORATE EXISTENCE:

The Corporation shall have perpetual existence.

ARTICLE V-INITIAL REGISTERED OFFICE AND INITIAL AGENT

ADDRESS OF OFFICE	AGENT AT SUCH ADDRESS
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18121 N.W. 6 PLACE MIAMI, FLORIDA 33169	LOUBERT PIERRE
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***IT IS ALSO THE MAILING ADDRESS FOR THIS CORPORATION

ARTICLE VI-DIRECTOR (s)

The Corporation shall have a minimum of one (1) director. The number of Directors may be increased from time to time by Amendment of By-Laws.

ARTICLE VII-INITIAL BOARD OF DIRECTORS IS/ARE:

DIRECTOR (s)	ADDRESS
LOUBERT PIERRE	18121 N.W. 6 PLACE
" "	LOUBERT PIERRE

The member (s) of the first board of Director, unless otherwise provided by the By-laws shall hold office for the first year of the Existence or until their successors are selected or appointed and qualified.

ARTICLE VIII: SUBSCRIBER (S)

NAME	ADDRESS	NUMBER OF SHARES
LOUBERT PIERRE	18121 N.W. 6 th PLACE MIAMI, FL 33169	80,000

ARTICLE IX -OFFICERS:

The officer of this Corporation shall be a President who shall be a Director, a Secretary , a Treasurer and a Treasurer and such officer, agent and factor as may deemed necessary

OFFICER	TITLE	ADDRESS
LOUBERT PIERRE	PRESIDENT	18121 NW 6 th PLACE
"	"	Miami, Fl 33169
LOUBERT PIERRE	TREASURER	18121 NW 6 PLACE
" "	"	Miami, Fl 33169
LOUBERT PIERRE	SECRETARY	18121 NW 6 PLACE
"	"	Miami, Fl 33169

ARTICLE X-AMENDMENT :

The corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation in the manner now or hereafter prescribed by the laws of the State of Florida and all rights conferred upon stockholder herein after are subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporator (s) have executed these Articles of Incorporation this 14th Day of JULY 2010

Signature (s) of Incorporator(s):

[Signature]
LOUBERT PIERRE / President

[Signature]
LOUBERT PIERRE / Treasurer

[Signature]
LOUBERT PIERRE / Secretary

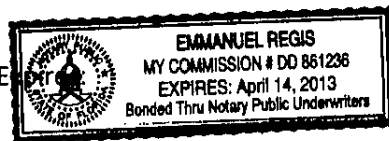
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

State of Florida
County of Miami-Dade

The foregoing instrument was acknowledged before me this 14th Day of JULY 2010

[Signature]
Notary Signature

My Commission Expires



CERTIFICATE DESIGNATED
REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the prevention of section 607.325, florida statutes, the undersigned Corporation organized under the Laws of the State of Florida, submits the following statement designating the registered agent in the State of Floida.

1-The name of the Corporation is:

ALLSTAR FOOT ACTION , INC

2-The name and address of the registered agent and office is:

LOUBERT PIERRE
18121 NW 6 PLACE
Miami, Florida 33169

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TALLAHASSEE, FLORIDA

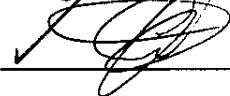
IT IS ALSO THE MAILING ADDRESS OF THIS CORPORATION



Signature/ Corporate Officer

Date: 07-14-10

Having been named to accept service of process for the above stated Corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agre to comply with the provision of all statutes relative to the proper and complete performance of my duties and I accept the duties, and obligation of section 607.325 Florida Statutes.

Signature:  _____

Datre: 07-14-10

I hereby certify that on this day before me, a Notary Public duly authorized in the State and County named above to take acknowlegments personally appeared:

Name: LOUBERT PIERRE known to be the person described and registered agent

State of Florida
County of Miami-Dade

The foregoing instrument was acknowledged and sworn to before me this 14th Day
of JULY 2010


Notary Signature

My Commission Expires:

