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2011 JAN 31 PM 4: 41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T. Burch FEB 1 2011

COVER LETTER

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

SUBJECT: All Around Protection, Inc.
(PROPOSED CORPORATE NAME -- MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00 Filing Fee	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED			

FROM: Felicia A. Wells
Name (Printed or typed)

2205 N. 22nd Street
Address

Tampa, FL 33605
City, State & Zip

(813) 242-8969
Daytime Telephone number

AllAroundMom3000@yahoo.com
E-mail address: (to be used for future annual report notification)

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)

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STATE OF FLORIDA
TALLAHASSEE

ARTICLE I NAME All Around Protection, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
2205 N. 22nd Street
Tampa, FL 33605

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
to engage in the transaction of any or all lawful business for which the corporation may be incorporated under the provisions of the Florida Business Corporation Act. More specifically to provide sale of security services.

ARTICLE IV SHARES
The number of shares of stock is: The aggregate number of shares which the corporation shall have authority to issue is
One Thousand (1,000) shares of capital stock, \$1.00 par value each.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Leo Walthaw, Jr. / President
Address: 2205 N 22nd Street
Tampa, FL 33605

Name and Title: Felicia A. Wells / Vice-President
Address: 2205 N. 22nd Street
Tampa, FL 33605

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Moses J. Wells, Jr.
Address: 1201 N Parsons Avenue
Seffner, FL 33584

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Felicia A. Wells
Address: 2205 N 22nd Street
Tampa, FL 33605

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

Moses J. Wells, Jr.
Required Signature/Registered Agent

1/27/2011
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Felicia A. Wells
Required Signature/Incorporator

1/27/2011
Date