

P110000094169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

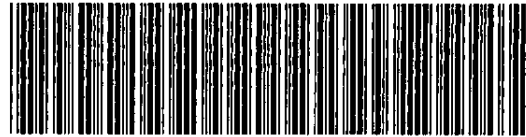
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

3544-
W11000053022



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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2011 OCT 27 AM 11:25

10/28/11

COVER LETTER

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

SUBJECT: ALLSTATE APPRAISAL SVCS, CORP

(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: WILFREDO DIAZ

Name (Printed or typed)

15554 CAIRNRYAN CT

Address

MIAMI LAKES FL. 33014

City, State & Zip

305-725-4646

Daytime Telephone number

WDIAZ@COVAD.NET

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

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



RECEIVED

11 OCT 27 AM 10:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 14, 2011

WILFREDO DIAZ
15554 CAIRNRYAN CT
MIAMI LAKES, FL 33014

SUBJECT: ALLSTATE APPRAISAL SVCS, CORP
Ref. Number: W11000053022

We have received your document for ALLSTATE APPRAISAL SVCS, CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 911A00023651

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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:

~~ALLSTATE APPRAISAL SVCS, CORP~~

ALLSTATE APPRAISAL &
VALUATION SVCS, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

15554 CAIRNRYAN CT
MIAMI LAKES FL 33014

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
APPRAISAL COMPANY

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: WILFREDO DIAZ DIRECTOR

Address: 15554 CAIRNRYAN CT
MIAMI LAKES FL 33014

Name and Title: _____

Address: _____

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: WILFREDO DIAZ

Address: 15554 CAIRNRYAN CT
MIAMI LAKES FL 33014

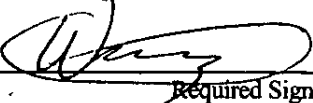
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: WILFREDO DIAZ

Address: 15554 CAIRNRYAN CT
MIAMI LAKES FL 33014

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

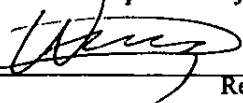


Required Signature/Registered Agent

10/11/2011

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.



Required Signature/Incorporator

10/11/2011

Date

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