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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN -6 PM 1:26

Ps 1/9/12

COVER LETTER

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

SUBJECT: Allan M. Weiner Incorporated

(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: Allan M. Weiner

Name (Printed or typed)

1010 S. Ocean Blvd. LPH10

Address

Pompano Beach, FL 33062

City, State & Zip

314-409-5774

Daytime Telephone number

cryogenicsupply@gmail.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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME Allan M. Weiner Incorporated
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
Allan M. Weiner
1010 S. Ocean Blvd. LPH10
Pompano Beach, FL 33062

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Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in the business of cryogenic equipment sales and service and to engage in the marketing and sales of any other product and service and all other related products and services. To carry on any other business in connection with the foregoing and all other legal acts permitted general and business corporations.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Allan M. Weiner - President</u>	Name and Title: _____
Address: <u>1010 S. Ocean Blvd. LPH10</u>	Address: _____
<u>Pompano Beach, FL 33062</u>	_____

Name and Title: <u>Allan M. Weiner - Secretary</u>	Name and Title: _____
Address: <u>1010 S. Ocean Blvd. LPH10</u>	Address: _____
<u>Pompano Beach, FL 33062</u>	_____

Name and Title: <u>Allan M. Weiner - Treasurer</u>	Name and Title: _____
Address: <u>1010 S. Ocean Blvd. LPH10</u>	Address: _____
<u>Pompano Beach, FL 33062</u>	_____

ARTICLE VI REGISTERED AGENT

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

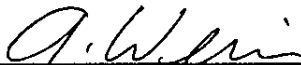
Name: Allan M. Weiner
Address: 1010 S. Ocean Blvd. LPH10
Pompano Beach, FL 33062

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Allan M. Weiner
Address: 1010 S. Ocean Blvd. LPH10
Pompano Beach, FL 33062

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

January 1, 2012

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

January 1, 2012

Date