(Address)	
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(City/State/Zip/Phone #)	01/11/1201005012 **78.75
(Business Entity Name)	
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pecial Instructions to Filing Officer:	FILED 12 JAN 11 PH 4: 47 ALLANASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: MItchell Allen, 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

e Filing Fee & Certificate of Status

\$78.75	\$87.50
LFiling Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL C	OPY REQUIRED
	•

FROM: Roy P. McLaurin

Name (Printed or typed)

10651 Copper Lake Drive			
Address	<u>1</u>	12	
Bonita Springs, FL 34135		JAN	-1-
City, State & Zip			Ē
314-369-8300		ΡĦ	Ē
Daytime Telephone number	9	÷	
roy@roymclaurin.com E-mail address: (to be used for future annual report notification)		1,7	

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)

ARTICLE I ' NAME Mitchell Allen, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address <u>10651 Copper Lake Drive</u> <u>Bonita Springs, FL 34135</u>

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real esate holdings

ARTICLE IV SHARES

The number of shares of stock is: One

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title Address:	Roy McLaurin, President/ Owner 10651 Copper Lake Drive Bonita Sprints, FL 34135	Address:	
Name and Title Address:	:		2:
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:	Roy McLaurin
Address:	10651 Copper Lake Drive
	Bonita Springs, FL 34135

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:	Roy McLaurin
Address:	10651 Copper Lake Drive
	Bonita Springs, FL 34135

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 9, 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.

unn Required Signature/Incorporator

January 9, 2012 Date

FILED

12 JAN 11 PM 4: 47 Mailing address, if different is:

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