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| (F | Requestor's Name) | | | |
|---|------------------------|--------|--|--|
| (A | Address) | | | |
| (A | Address) | | | |
| (C | City/State/Zip/Phone # |) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (E | Business Entity Name) | | | |
| (0 | Ocument Number) | | | |
| Certified Copies | Certificates of | Status | | |
| Special Instructions to Filing Officer: | | | | |
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| | Office Use Only | | | |
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SECRETARY OF SEATE
TALLARIASSEE

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COVER LETTER^b

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

| SUBJECT: All Florida Inspections, Inc. | | | | |
|--|-------------------------------------|--|--|--|
| (PROPOSED CORPORAT | TE NAME – <u>MUST INC</u> I | LUDE SUFFIX) | | |
| Enclosed are an original and one (1) copy of the artic | cles of incorporation an | d a check for: | | |
| \$70.00 \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate of Status | | |
| | ADDITIONAL C | OPY REQUIRED | | |
| FROM: David B. Drenga | (Printed or typed) | | | |
| 982 Macco Rd. | | | | |
| A | Address | | | |
| Cocoa, Fl 32927 | State & Zip | | | |
| 321-639-1051 Daytime Te | elephone number | | | |
| ddrenga@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)

| ARTICLE II | PRINCIPAL OFFICE | | |
|-------------------|---|--------------------------------|------------------------------------|
| | Principal street address | Mailir | ng address, if different is: |
| Ç | 982 Macco Rd. | | |
| 9 | Cocoa, Fl 32927 | | |
| | | **** | |
| ARTICLE III | PURPOSE | | |
| | hich the corporation is organized is: | | |
| To conduct h | ome inspections. | | ÆSE ₹ |
| | | | |
| | | | JUN |
| | | | <i>i</i> ⊘ }* 1 _! |
| | | | 22 6 7 |
| ARTICLE IV | SHADES | | RS R D |
| | res of stock is:100 | | r~+ { /~, |
| THE HAMBON OF SHA | 103 Of Swork IS. FOO | | 会長 長 |
| ARTICLE V | INITIAL OFFICERS AND/OR DIREC | TORS | |
| Name and T | itle:David B. Drenga, President | Name and Title: | <u>दण ज</u> |
| Address: | 982 Macco Rd. | Address: | |
| | Cocoa, Fl 32927 | | |
| | | | |
| N | 5.1 | Name and Title. | |
| | itle: | Name and Title: | |
| Address: | | Address: | |
| | | | |
| | | | |
| Name and T | itle: | Name and Title: | |
| Address: | | Address: | |
| | | | |
| | - | | |
| | REGISTERED AGENT | | |
| | orida street address (P.O. Box NOT acceptab | , , | |
| Name: Address: | David B. Drenga | | |
| Address: | 982 Macco Rd | | |
| | Cocoa, Fl 32927 | | |
| ARTICLE VII | <u>INCORPORATOR</u> | | |
| | Iress of the Incorporator is: | | |
| Name: | David B. Drenga | | |
| Address: | 982 Macco Rd | | |
| Co | Cocoa, Fl 32927 | | |
| Address: | 982 Macco Rd. Cocoa, Fl 32927 | | |
| Yavina keen nam | ed as registered agent to accept service of pr | acess for the above stated co | ornoration at the place designated |
| | m familiar with and accept the appointment a | | |
| ベバイ | | | . , |
| 1111 7 | CH. | | June 5.12. |
| <u> </u> | Required Signature/Registered Agent | | June 5, 12 Date |
| | - Roquited Digitatia o Registered Agent | | air on the |
| | ment and affirm that the facts stated herein | | |
| locument to the D | epartment of State constitutes a third degree j | felony as provided for in s.81 | 7.155, F.S. |
| | | | |
| WU X | 5. W | | June 5, 12 Date |
| | Required Signature/Incorporator | | Date |