P12000102146

•	•			
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MA	IL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
•.				
Office Use Only				



500242077435

12/03/12--01038--031 **87.50

N.2-6235

12 DEC 14 PH 3: 5

COVER LETTER

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

SUBJECT: AUST	IN MCALLISTER INC. (PROPOSED CORPORA	TE NAME – MUST INCLU	!DE SUFFIX)
	inal and one (1) copy of the art		
S70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Status PY REQUIRED
FROM: <u>Au</u>	nstin McAllister	e (Printed or typed)	i die umfelise.
	5426 S.E. Moseley Dr		
<u> </u>	Stuart, Fl. 34997 City.	State & Zip	
	(561) 666~0871 Daytime T	elephone number	
	austinmcallister772@ E-mail address: (to be use	comcast.net	notification)
	NOTE: Please provide the o	riginal and one copy of	the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

12 DEC 14 AM II: 04

December 4, 2012

AUSTIN MCALLISTER 5426 SE MOSELY DR STUART, FL 34997

SUBJECT: AUSTIN MCALLISTER INC

Ref. Number: W12000060235

We have received your document for AUSTIN MCALLISTER INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Article(s) VI & VII.

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) 245-6052.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 912A00028709

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

	AME pration shall be: AUSTIN MCALLIS	TER INC.	
ARTICLE II PI	Principal <u>street</u> address	Mailing	address, if different is:
	26 S.E. Moseley Dr. Dart, Fl. 34997.		N/A
ARTICLE III PU The purpose for which	TRPOSE h the corporation is organized is:		721 [ALL
Computer N	Network consulting		PILED DEC 14 PM ARENSEE F
The number of shares	HARES of stock is: 500_shares_of_1.00	each.	$\frac{1}{2}$ ω
ARTICLE V IN	TITIAL OFFICERS AND/OR DIRECTO	RS	
Name and Title: Address:	Austin McAllister (pres 5426 S.E. Moseley Dr.	i demeand Title:Address:	
	Stuart Fl. 34997.		/-
Name and Title:		Name and Title:	
Address:	N /A		
	N /A		N/A
Name and Title: Address:		Name and Title:	· ·
	N/A		N/A
	EGISTERED AGENT a street address (P.O. Box NOT acceptable) of Austin MCAllister 5426 Se Moseley of Stuat FL 34997	of the registered agent is: 	
ARTICLE VII IN	CORPORATOR		
	s of the Incorporator is:		
Name:	Austin MCAllister	_	
Address:	Stuart FL 34997	_	
	is registered agent to accept service of proces imiliar with and accept the appointment as re		
MANNER	Mon		November 27 2012
SUVVI VV	Required Signature/Registered Agent	and the state of t	November 27, 2012 Date
	it and affirm that the facts stated herein are		e false information submitted in a
(////	n-11-2-		November 27,2012
10/1/12/3	Required Signature/Incorporator	in the state of th	Date