

PI3000086427

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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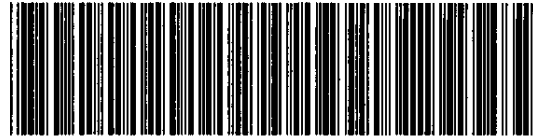
(Business Entity Name)

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13 OCT 21 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1113-55113

MD 10/23



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 3, 2013

KRIS I. DOUGHERTY, C.P.A.
1111 KANE CONCOURSE #611A
BAY HARBOR ISLANDS, FL 33154

SUBJECT: ALZ CORPORATION
Ref. Number: W13000055113

We have received your document for ALZ CORPORATION and your check(s) totaling \$78.75. 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.

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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 813A00023287



1111 Kane Concourse
Suite 611-A
Bay Harbor Islands
Florida 33154
Tel: (305) 868-1333
Fax: (305) 861-2296
E-mail: krisdou@msn.com

KRIS I. DOUGHERTY

CERTIFIED PUBLIC ACCOUNTANT

October 17, 2013

Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: ALZ CORPORATION.
Ref. #: W13000055113

Dear Madam/Sir:

We are receipt of your letter number 813A00023287 dated October 3, 2013 (copy enclosed). Enclosed please find all corrections made for proper filing for ALZ Contract Services, Inc.

If you should have any questions, please feel free to contact the undersigned.

Very Truly Yours,

Kris I. Dougherty, C.P.A.

KID:lm
enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: **ALZ CONTRACT SERVICES, 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

☒ \$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: **ALEXIS L. ZARBATANY**
Name (Printed or typed)
C/O 1111 KANE CONCOURSE # 611A
Address
BAY HARBOR ISLANDS, FL. 33154
City, State & Zip
305-868-1333
Daytime Telephone number
KRISDOU@MSN.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 I NAME ALZ CONTRACT SERVICES, INC.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address
C/O 1111 KANE CONCOURSE # 611A
BAY HARBOR ISLANDS, FL 33154

Mailing address, if different is: _____

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STATE OF FLORIDA
BAY HARBOR ISLANDS

ARTICLE III PURPOSE ANY LAWFUL PURPOSE
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 500
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>ALEXIS L. ZARBATANY, PRES</u>	Name and Title:	_____
Address	<u>601 93RD STREET</u>	Address:	_____
	<u>SURFSIDE, FL. 33154</u>		_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

(conti.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: KRIS I DOUGHERTY, CPA
Address: 1111 KANE CONCOURSE #611A
BAY HARBOR ISLANDS, FL. 33154

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: KRIS I DOUGHERTY, CPA
Address: 1111 KANE CONCOURSE # 611A
BAY HARBOR ISLANDS, FL 33154

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

Kris I Dougherty 10/15/13
Required Signature/Registered Agent 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.

Kris I. Dougherty 10/15/13
Required Signature/Incorporator Date