

# P15000051005

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**To:**

Division of Corporations  
Fax Number : (850)617-6381

**From:**

Account Name : LAZARUS CORPORATE FILING SERVICE, INC  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

**Email Address:** \_\_\_\_\_

## FLORIDA PROFIT/NON PROFIT CORPORATION ALLIANCE PURCHASING & SHIPPING INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

JUN 1 2 2015

S. GILBERT

15 JUN 11 AM 10:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 JUN 11 PM 4:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

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

H15000142520

**ARTICLE I NAME:** The name of the corporation is:

Alliance Purchasing & Shipping Inc

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

22-8337 Coral Lake Manor  
Coral Springs FL 33065

**ARTICLE III SHARES:** The number of shares of stock is: 500

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

P: Remy Thevenot  
VP: Monfort Desanges

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 JUN 11 AM 10:18

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**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Remy Thevenot  
22-8337 Coral Lake Manor  
Coral Springs FL 33065

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

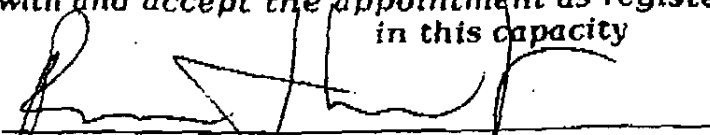
Remy Thevenot  
22-8337 Coral Lake Manor  
Coral Springs FL 33065

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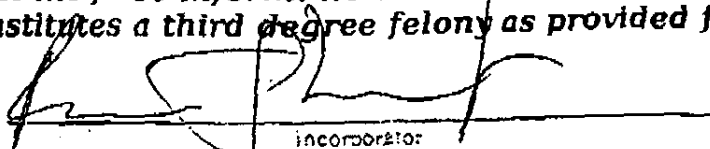
**Required Signatures:**

***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***

  
\_\_\_\_\_  
Registered Agent

6-11-15  
\_\_\_\_\_  
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.***

  
\_\_\_\_\_  
Incorporator

6-11-15  
\_\_\_\_\_  
Date

H15000142520