

P15000078112

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

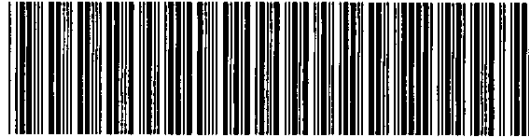
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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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~~W15-59219~~

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2015 SEP 22 PM 12:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

G20127

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SEP 23 2015

**COVER LETTER**

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

**SUBJECT:** ALLEN ENTERPRISES INTERNATIONAL CORPORATION

(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** KENNETH BUZZIE

Name (Printed or typed)

15000 CITRUS COUNTRY DR SUITE 302

Address

DADE CITY, FL 33523

City, State & Zip

(352) 4671475

Daytime Telephone number

KENNETHBUZZIE@GMAIL.COM

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 8, 2015

KENNETH BUZZIE  
15000 CIRTUS COUNTRY DR, STE 302  
DADE CITY, FL 33523

SUBJECT: ALLEN ENTERPRISES CORPORATION  
Ref. Number: W15000059219

We have received your document for ALLEN ENTERPRISES CORPORATION and your check(s) totaling \$70.00. 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.

The document number of the name conflict is G20127.

Please return 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.

Teresa Brown  
Regulatory Specialist II

Letter Number: 815A00018911

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**The name of the corporation shall be: ALLEN ENTERPRISES INTERNATIONAL CORPORATION**ARTICLE II PRINCIPAL OFFICE**Principal street address15000 CITRUS COUNTRY DRSUITE 302DADE CITY, FL 33523

Mailing address, if different is:

P.O.Box 523TRILBY, FL 33593**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

ANY AND ALL LAWFUL BUSINESS

2015 SEP 22 PM 12:38  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: CHRISTINE BUZZIE PRESIDENTAddress 15000 CITRUS COUNTRY DRSUITE 302DADE CITY, FL 33523Name and Title: KENNETH BUZZIE VICE PRESIDENTAddress: 15000 CITRUS COUNTRY DRSUITE 302DADE CITY, FL 33523

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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: KENNETH BUZZIE  
Address: 15000 CITRUS COUNTRY DR SUITE 302  
DADE CITY, FL 33523

**ARTICLE VII INCORPORATOR**

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

Name: KENNETH BUZZIE  
Address: 15000 CITRUS COUNTRY DR SUITE 302  
DADE CITY, FL 33523

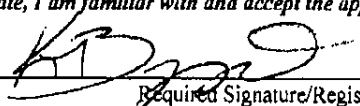
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

9/25/2015

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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

9/25/2015

Date