

PI5000093330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

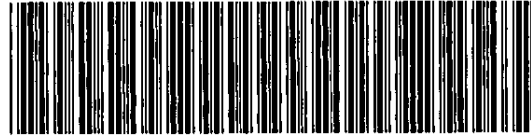
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2015 NOV -6 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 18 2015

T. BROWN

COVER LETTER

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

SUBJECT: All Systems Air Conditioning Service, 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: Patrick J. McElmeel, Jr.
Name (Printed or typed)

320 SE 14th Avenue
Address

Pompano Beach, FL 33060
City, State & Zip

954-785-4887
Daytime Telephone number

allsystemsac@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 I NAME

The name of the corporation shall be: All Systems Air Conditioning Service, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

320 SE 14th Avenue
Pompano Beach, FL 33060

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide air conditioning services, repairs, installations and all business activities related thereto, including purchase of real or personal property relative to this purpose and all lawful related activities to accomplish these goals

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Patrick J. McElmeel, Jr. Name and Title: President & Director

Address: 320 SE 14th Avenue Address: _____
Pompano Beach, FL 33060

Name and Title: Mark Andrew McElmeel Name and Title: Secretary

Address: 320 SE 14th Avenue Address: _____
Pompano Beach, FL 33060

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: Patrick J. McElmeel, Jr.
Address: 320 SE 14th Avenue
Pompano Beach, FL 33060

ARTICLE VII INCORPORATOR

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

Name: Patrick J. McElmeel, Jr.
Address: 320 SE 14th Avenue
Pompano Beach, FL 33060

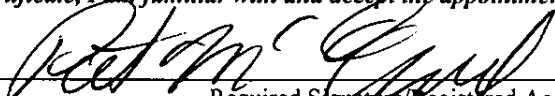
ARTICLE VIII EFFECTIVE DATE:

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

November 2, 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

November 2, 2015
Date