

P16000033647

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000092910 3)))



H1600009291034BC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800) 221-2972
Fax Number : (888) 692-9256

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

16 APR 14 PM 12:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION
ALLSTAR SECURITY & CONSULTING - FLORIDA, INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 APR 14 AM 8:49

APR 15 2016

T. SCOTT
Help

Electronic Filing Menu

Corporate Filing Menu

From:

04/14/2016 08:21

#327 P.002/003

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: ALLSTAR SECURITY & CONSULTING - FLORIDA, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2903 SW 37th Terrace

Cape Coral, FL 33914

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To transact any and all lawful activity for which a corporation may
be formed.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: C. Feldstein (President)

Name and Title: _____

Address 2903 SW 37th Terrace

Address: _____

Cape Coral, FL 33914

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 APR 14 AM 8:49

From:

04/14/2016 08:21

#327 P.003/003

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: C. Feldstein
Address: 2903 SW 37th Terrace
Cape Coral, FL 33914

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: C. Feldstein
Address: 2903 SW 37th Terrace
Cape Coral, FL 33914

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 said corporation and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

April 6, 2016

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

April 6, 2016

Date