

PI 8000089860

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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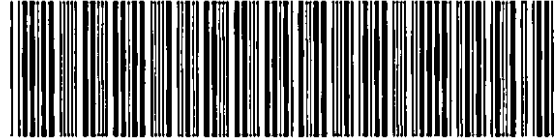
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OCT 31 2018



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10/29/18--01032--006 **78.75

18 OCT 29 PM 1:06
Filing Office

COVER LETTER

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

SUBJECT: ALL STAR ENTERPRISES OF FLORIDA, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: PAUL L. MCCLURE, CPA
Name (Printed or typed)

5750 FRENCH CREEK COURT
Address

ELLENTON, FLORIDA 34222
City, State & Zip

941-723-7700
Daytime Telephone number

pmcclurecpa@bellsouth.net
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 STAR ENTERPRISES OF FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2332 VINTAGE STREET

SARASOTA, FLORIDA 34240

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to conduct any and all legal business including the buying and selling of real estate.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Caren Starala- President

Address: 2332 Vintage Street

Sarasota, Florida 34240

Name and Title: Joseph F. McGrane- V. Pres.

Address: 2332 Vintage Street

Sarasota, Florida 34240

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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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: Joseph F. McGrane

Address: 2332 Vintage Street

Sarasota, Florida 34240

ARTICLE VII INCORPORATOR

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

Name: Caren Starala

Address: 2332 Vintage Street

Sarasota, Florida 34240

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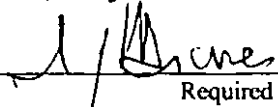
ARTICLE VIII EFFECTIVE DATE: 10/08/2018

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 days prior or 90 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

10/05/2018
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

10/05/2018
Date