

P24000029301

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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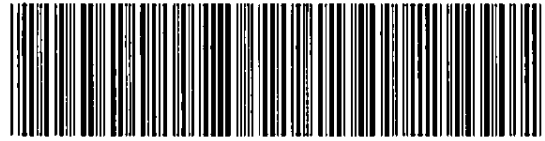
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2024 APR 17 PM 12:43
CLERK OF STATE
TALLAHASSEE, FL

T. MATTHEWS

APR 29 2024

COVER LETTER

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

SUBJECT: Allen E. Knight Services, 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

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

ADDITIONAL COPY REQUIRED

FROM: Christina Hilsman
Name (Printed or typed)

33 SW 12th Terr
Address

Boca Raton, FL 33486
City, State & Zip

561.756.4313
Daytime Telephone number

Chilsman75@yahoo.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: Allen E. Knight Services, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

6127 La Vida Terr

Boca Raton, FL 33433

MON APR 17 PM 12:43
Filing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Allen E. Knight - President

Address: 6127 La Vida Terr Address: _____

Boca Raton, FL 33433

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: Hilsman Accounting^{and} Tax Services, Inc
Address: 33 SW 12th Terr
Boca Raton, FL 33486

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Allen E. Knight
Address: 6127 La Vida Terr
Boca Raton, FL 33433

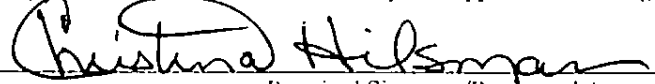
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: April 8, 2024 (OPTIONAL)

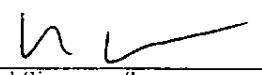
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 4.8.24
Required Signature/Registered Agent 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.

 4/8/24
Required Signature/Incorporator Date