

P 96000022763

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302

TOLL FREE No. 1-800-342-8062

FAX (904) 222-1222

NAME _____

FIRM _____

ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service _____ Two Day Service _____

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

RE:

All American

Tampa Bay 86 MAR 13 PM 3:14

SECTION OF DISBURSED
 TALLAHASSEE, FLORIDA

☒ Capital Express™
☐ Art. of Inc. Filing _____
☐ Corp. Record Search _____
☐ Ltd. Partnership Filing _____
☐ Foreign Corp. Filing _____
☒ () Copy(s) _____
Photo
☐ Art. of Amend. Filing _____
☐ Dissolution/Withdrawal _____
☐ C U S _____
☐ Fictitious Name Filing _____
☐ Name Reservation _____
☐ Annual Report/Reinstatement _____
☐ Reg. Agent Service _____
☐ Document Filing _____
☐ Corporate Kit _____
☐ Vehicle Search _____
☐ Driving Record _____
☐ Document Retrieval _____
☐ UCC 1 or 3 Filing _____
☐ UCC 11 Search _____
☐ UCC 11 Retrieval _____
☐ File No.'s _____ Copies _____
☐ Courier Service _____
☐ Shipping/Handling _____
☐ Phone () _____
☐ Top Priority _____
☐ Express Mail Prep. _____
☐ FAX () _____ pgs. _____

SUBTOTALS _____

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit Invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU
 from
 Your Capital Connection

REQUEST TAKEN CONFIRMED APPROVED

DATE *3/13*

TIME *1:30 PM*

BY *DD*

WALK-IN
 Will Pick Up _____

FILED

96 MAR 13 PM 3:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

All American Services of Tampa Bay, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Mailing Address:

2075 Tanglewood Dr. NE
St. Petersburg, FL 33702

Principal Place of Business:

2075 Tanglewood Dr. NE
St. Petersburg, FL 33702

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

7,000 Shares

All American Services of Tampa Bay, Inc.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Charlie Goodwin
2075 Tanglewood Dr. NE
St. Petersburg, FL 33702

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Charlie Goodwin
2075 Tanglewood Dr. NE
St. Petersburg, FL 33702

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
12th day of March, 19 96.



Signature

Signature

**ARTICLES OF INCORPORATION
FILING FEE- \$35**

FILED

96 MAR 13 PM 3:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the Registered Office/Registered Agent, in the State of Florida.

1. The name of the Corporation is:

All American Services of Tampa Bay, Inc.

2. The name and address of the registered agent and office is:

Charlie Goodwin
2075 Tanglewood Dr. NE
St. Petersburg, FL 33702

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Signature


Date

REGISTERED AGENT-FILING FEE \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314