70 CRANSHITTAL LETTER 41325

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

SUBJECT:	McALLISTER & ASSOC	CIATES, INC.		
	(Proposed corpor	ate name - must include suff	īx)	
	368r-rew	9		
Enclosed is an original a	and one(1) copy of the article	s of incorporation and a	check for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	ELLEN J. McALL			
·	Name (Printed or typed) 15909 DOVER CLIFFE DRIVE		97 SECI TALL	
	Address		AHAS	η
	LUTZ, FLORIDA 33549		-6 A	_ _
	City, State	e & Zip	MH 9: 58	ז
	(813) 962-8758		: 58	

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 3, 1997

ELLEN J. MCALLISTER 15909 DOVER CLIFFE DRIVE LUTZ, FL 33549

SUBJECT: MCALLISTER & ASSOCIATES, INC.

Ref. Number: W97000007822

We have received your document for MCALLISTER & ASSOCIATES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Vickie Whitfield Corporate Specialist

Letter Number: 797A00016921



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 23, 1997

ELLEN J. MCALLISTER 15909 DOVER CLIFFE DRIVE LUTZ, FL 33549

SUBJECT: MCALLISTER CONSULTANTS, INC.

Ref. Number: W97000007822

We have received your document for MCALLISTER CONSULTANTS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Vickie Whitfield Corporate Specialist

Letter Number: 797A00016921



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 1, 1997

ELLEN J. MCALLISTER ***3RD REJECT***
15909 DOVER CLIFFE DRIVE
LUTZ, FL 33549

SUBJECT: MCALLISTER CONSULTANTS, INC.

Ref. Number: W97000007822

We have received your document for MCALLISTER CONSULTANTS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Vickie Whitfield Corporate Specialist

Letter Number: 797A00016921

Please See the attack set of articles.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

MCALLISTER & ASSOCIATES CONSULTING GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

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

15909 **BOVER** CLIFFE DRIVE LUTZ, FLORIDA 33549

ARTICLE III SHARES

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

1,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are.

ELLEN J. McALLISTER 15909 DOVER CLIFFE DR. LUTZ, FLORIDA 33549

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

ELLEN J. MCALLISTER 15909 DOVER CLIFFE DRIVE LUTZ, FLORIDA 33549

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

Date