

P97000081090

TRANSMITTAL LETTER

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

SUBJECT: ALL-IN-ALL, INC.

(Proposed corporate name - must include suffix)

000002296520--6

-09/18/97--01020--004

*****78.75 *****78.75

Enclosed is an original and one (1) copy of the articles 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 Copy Required

FROM:

CHARLES SALERNO

Name (printed or typed)

1422 E. MOHAWK AVE.

Address

TAMPA, FL 33604-7218

City, State & Zip

813-231-4134

Daytime Telephone number

FILED
97 SEP 18 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 18

BSB

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

FILED

97 SEP 18 PM 2:14

ARTICLES OF INCORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 IN ALL, INC.

ARTICLE II PRINCIPAL OFFICE

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

1422 E. MOHAWK AVE.
TAMPA, FL. 33604-7218

ARTICLE III SHARES

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

1000 shares at \$1.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CHARLES SALERNO
1422 E. MOHAWK AVE.
TAMPA, FL. 33604-7218

ARTICLE V INCORPORATOR(S)

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

CHARLES SALERNO
1422 E. MOHAWK AVE.
TAMPA, FL. 33604-7218

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

16 day of SEPTEMBER, 1997.

Charles Salerno
Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

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 IN ALL, INC.

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

CHARLES SALERNO

(Name)

1422 E. MOHAWK AVE.

(P.O. Box or Mail Drop Box ~~NOT~~ acceptable)

TAMPA, FL. 33604-7218

(City/State/Zip)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Charles Salerno
(Signature)

9-16-97
(Date)