P980675

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

SUBJECT:	Allen Supply	Inc.		<u></u>
	(Proposeti corpor	ate name - must include suf	fix) [.]	
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			*****131.2	U1U28OD2
				5 ****131.2
Enclosed is an origi	nal and one(1) copy of the articles	s of incorporation and a c	check for :	-
□ \$70.00	□ \$78.75	□\$122.50	X \$131,25	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
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	ADDITIONAL COPY REQUIRED			
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FROM:	<u>Carol</u> C. P	l		
FROM	Name (Pr	inted or typed)		
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	443 SE Wallace Terr. Address			S T
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				2 11
	City, State & Zip			- 7
				F
	561-871-0610			
	Daytime Telephone number			

NOTE: Please provide the original and one copy of the 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

The name of the corporation shall be:

Allen Supply, Inc.

ARTICLE II PRINCIPAL OFFICE

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

S.E. Wallaco Terraco Port Saint Lucie, Fl. 34983

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Carol C. Piano 443 SE Wallace Terr. Pt. St. Lucie, Fl. 34983 V INCORPORATOR

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

Carol C. Piano 443 SE Wallace Terr. Pt. St. Lucie, Fl. 34983

(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