

PP1000055709

TRANSMITTAL LETTER

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

SUBJECT: Avalon Audit Inc.
(Proposed corporate name - must include suffix)

800002907958--1
-06/17/99-01084-009
*****70.00 *****70.00

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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Netanya Newman
(Name (Printed or typed))

5240 Babcock St., Suite 218
Address

Palm Bay, FL 32905
City, State & Zip

Netanya Newman GAVE

(407) 984-3330
Daytime Telephone number

AUTHORIZATION BY PHONE TO

CORRECT Name

DATE 6/18

DOC. EXAM. KB

EFFECTIVE DATE
6-15-99

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

99 JUN 17 AM 7:17
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

6-15-99

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:

Avalon Audit Inc.

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 61029

Palm Bay, Florida 32906-1029

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:

Michael Van Deventer
5240 Babcock St Suite 218
Palm Bay FL 32905

ARTICLE V INCORPORATOR

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

Gary Coons P.O. Box 1010
Lyons, Co. 80540

ARTICLE VI EFFECTIVE DATE

The effective date for Avalon Audit Inc., is June 15, 1999.


Signature/Incorporator

6/15/99

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

6/15/99

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA