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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

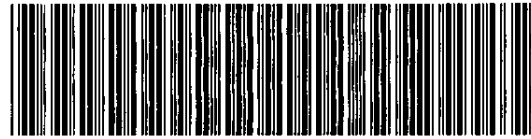
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11 AUG - 2 AM 11:46  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MRS  
8/3

**COVER LETTER**

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

**SUBJECT: Eagle Talon Investigations, Inc.**  
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Brandon Dornbusch  
Name (Printed or typed)

11636 Pineloch Loop  
Address

Clermont, FL 34711  
City, State & Zip

352-255-3077  
Daytime Telephone number

eagletaloninvestigations@gmail.com  
E-mail address: (to be used for future annual report notification)

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME** Eagle Talon Investigations, Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
11636 Pineloch Loop  
Clermont, FL 34711

Mailing address, if different is:  
2429 S. U.S. Hwy 27  
Ste 108  
Clermont, FL 34711

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
To form my own private investigation company

**ARTICLE IV SHARES**

The number of shares of stock is: 1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Brandon Dornbusch / President  
Address: 11636 Pineloch Loop  
Clermont, FL 34711

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: Dana Dornbusch / Vice President  
Address: 11636 Pineloch Loop  
Clermont, FL 34711

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Brandon Dornbusch  
Address: 11636 Pineloch Loop  
Clermont, FL 34711

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Brandon Dornbusch  
Address: 11636 Pineloch Loop  
Clermont, FL 34711

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

\_\_\_\_\_  
Required Signature/Registered Agent

8/1/11  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

\_\_\_\_\_  
Required Signature/Incorporator

8/1/11  
Date

FILED  
11 AUG -2 04:11:46  
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TALLAHASSEE FLORIDA