

PO0000030135

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

SUBJECT: DAVIN DATA PRINTING, INC.
(Proposed corporate name - must include suffix)

000003176500--1
-03/20/00--01125--015
*****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 of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: MORRIS DAVIS
Name (Printed or typed)

14403 AINSDALE CT
Address

ORLANDO FL 32828
City, State & Zip

407 275 2706
Daytime Telephone number

FILED
00 MAR 20 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

DAVIS DATA PRINTING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2053 Premier Row ORLANDO FL 32809

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

1,000 Common NO PAR

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

MORRIS DAVIS 14403 AINSDALE CT ORLANDO FL 32828 President - DIRECTOR
KAREN DAVIS 14403 AINSDALE CT ORLANDO FL 32828 SECRETARY - DIRECTOR
NATHAN BOUCHER 1640 WAKE FOREST RD NW, PALM BAY FL 32907 - DIRECTOR

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

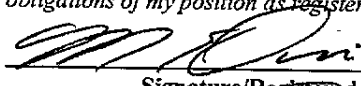
MORRIS DAVIS 2053 PREMIER ROW ORLANDO FL 32809

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

MORRIS DAVIS 14403 AINSDALE CT ORLANDO FL 32828

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

3-15-00
Date


Signature/Incorporator

3-15-00
Date

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00 MAR 20 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA