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

			المهاريخ
SUBJECT: The	DAVIDS & COM	n pan y Inc. orate name must include suff	fix)
		4 0	000325349 -05/15/000118 *****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	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL COPY REQUIRED	
FROM: THE DAVING of Company Inc. Name (Printed or typed)			

Name (Frinted or typed)

4123 W. 2074 (T.
Address

PANAMA (LTV, Fl. 32405
City, State & Zip

Daytime Telephone number

DOG EXAM NO

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

ARTICLES OF INCORPORATION

The undersigned incoporrator, for the purpose of forming a corporation under the Florida Business Corporation Act, herby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of corporation shall be:

THE DAVID'S & COMPANY INC.

ARTICLE II PRINCIPAL OFFICE

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

Business Address 4123 W. 20th Ct. Panama City, Florida 32405 Mailing Address 4123 W. 20th Ct. Panama City, Florida 32405

ARTICLE III SHARES

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

One Thousand (1,000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

David Treace 4123 W. 20th Ct. Panama City, Florida 32405

ARTICLEY INCORPORATOR

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

David Treace 4123 W. 20th Ct.

Panama City, Florida 32405

Signature/Incorporator

Date

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 and 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

Date

