

TRANSMITTAL LETTER  
**PO1000045835**

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

300003943463--1  
-04/02/01--01106--003  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT:

Brothers and Sisters Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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:

Ketny Legagneur  
Name (Printed or typed)

426 Lakeside Dr #248  
Address

Margate, FL 33063  
City, State & Zip

954-970-9783  
Daytime Telephone number

FILED  
2001 MAY -7 AM 10:38  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

2590-2544  
W01-7672

5/8/01



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

FILED  
2001 MAY -7 AM 10:38  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

April 5, 2001

KETNY LEGAGNEUR  
426 LAKESIDE DRIVE #248  
MARGATE, FL 33063

SUBJECT: BROTHERS AND SISTERS, INC.  
Ref. Number: W01000007672

We have received your document for BROTHERS AND SISTERS, INC.. However, the document has not been filed and is being returned for the following:

The person designated as incorporator in the document and the person signing as incorporator must be the same.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6973.

Claretha Golden  
Document Specialist  
New Filings Section

Letter Number: 801A00020195

# 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:

Demand Service, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3101 Cape Dr  
Margate, FL 33063

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Insurance Administration (Health)

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Widdell Dalrymple  
3101 Cape Drive  
Margate, FL 33063

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Ketny Legagneur  
426 Lakeside Dr #248  
Margate, FL 33063

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Widdell Dalrymple  
3101 Cape Dr  
Margate, FL 33063

\*\*\*\*\*  
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

Ketny Legagneur  
Signature/Registered Agent

5-2-01

Date

Widdell Dalrymple  
Signature/Incorporator

5-2-01

Date

FILED

2001 MAY -7 AM 10:38

SECRETARY OF STATE  
TALLAHASSEE FLORIDA