

Division of Corporations

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**P03000020110**

Florida Department of State  
Division of Corporations  
Public Access System

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## To:

Division of Corporations  
Fax Number : (850) 205-0381

## From:

Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (305) 673-0347  
Fax Number : (305) 532-0738

FILED  
2003 FEB 18 PM 8:26  
CLERK OF COURT  
STATE OF FLORIDA

## FLORIDA PROFIT CORPORATION OR P.A.

Saint Barbara DL, Inc.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$70.00 |

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02-20-03  
T.B.

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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 :  
Saint Barbara DL, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address  
8604 Lineyard Cay  
West Palm Beach, Florida 33411

**ARTICLE III PURPOSE**

The purpose for which the corporation is formed is to engage in any activity  
business permitted under the laws of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is:  
1,500 COMMON SHARES PAR VALUE \$.10

**ARTICLE V INITIAL OFFICERS / DIRECTORS**

The name(s), address(es), and title(s) of the directors and officers is:

Director & President

Dulce Z Penalver

8604 Lineyard Cay West

Palm Beach , Florida 33411

Director & Secretary

Lazaro E Penalver

8604 Lineyard Cay West

Palm Beach , Florida 33411

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**ARTICLE VI REGISTERED AGENT**

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

Dulce Z Penalver

8604 Lineyard Cay West

Palm Beach , Florida 33411

**ARTICLE VII INCORPORATOR**

The name and Florida street address of the incorporator is:

Dulce Z Penalver

8604 Lineyard Cay West

Palm Beach , Florida 33411

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above 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.

  
\_\_\_\_\_  
Signature / Registered Agent2/19/03  
Date  
\_\_\_\_\_  
Signature/Incorporator2/19/03  
Date

HD 30000565538.