

PO4000007782

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

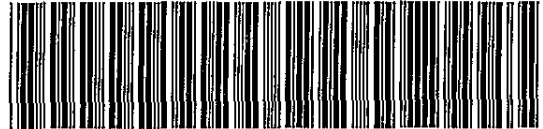
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



400025334834

12/11/03 - 01028--013 \*\*87.50

04 JAN 12 PM 1:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

## TRANSMITTAL LETTER

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

**SUBJECT:** DR Enterprises, 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

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** DR Enterprises, Inc.

Name (Printed or typed)

701 West Colonial Drive

Address

Orlando, Fl 32805

City, State & Zip

352-624-4100

Daytime Telephone number

**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

The name of the corporation shall be:  
DR Enterprises of Central Florida, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:  
1713 Silver Springs Blvd.  
Ocala, Fl 34471

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
Any and all lawful business

### ARTICLE IV SHARES

The number of shares of stock is:  
4,000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):  
Maria Diaz-2704 SW 20th Avenue, Ocala, Fl 34474 - President  
Beverly Robinson-1610 SE 22nd Avenue, Ocala, Fl 34470 - Vice President  
Chris Diaz-2704 SW 20th Avenue, Ocala, Fl 34474 - Treasurer  
Jim Griffin-301 SW 145th Street, Ocala, Fl 34473 - Secretary

### ARTICLE VI REGISTERED AGENT

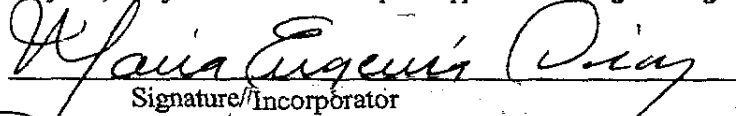
The name and Florida street address of the registered agent is:  
Jim Griffin  
301 SW 145th Street  
Ocala, Fl 34473

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:  
Maria Diaz  
2704 SW 20th Avenue  
Ocala, Fl 34474

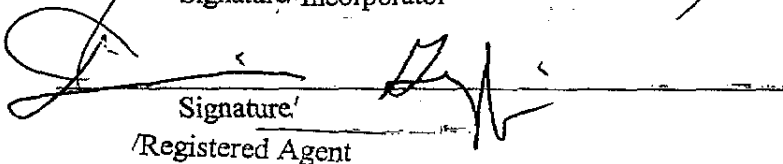
\*\*\*\*\*

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

  
Signature/Incorporator

12/10/03

Date

  
Signature/  
Registered Agent

1/8/04

Date

FILED

04 JAN 12 PM 1:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA