

Florida Department of State

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To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : IZ0000000257
Phone : (850)224-8870
Fax Number : (850)224-7047

FLORIDA PROFIT CORPORATION OR P.A.

David & Son Consultants, INC.

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CAPITAL CONNECTION

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CECNETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

David & Son Consultants, INC.

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

ARTICLE I: NAME

The name of the corporation is David & Son Consultants, INC.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 323 South 2nd Street, Ft. Pierce, FL. 34950

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is twenty (20) shares having a par value of \$1.00 per share.

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ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Deborah Fromang, 323 South 2nd Street, Ft. Pierce, FL. 34950

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL. 32301.

ARTICLE VI: OFFICERS & DIRECTORS

The name and address of the initial Officers and Directors of the corporation are:

David Fromang, Secretary, 1 Dolphin Dr., Vero Beach, FL. 32960

Sean Fromang, President, 1 Dolphin Dr., Vero Beach, FL. 32960

The undersigned has executed these Articles of Incorporation this 24th day of June 2005.

"Your Capital Connection, Inc. by, Weimar Lopez, Client Representative"

' CAPITAL CONNECTION

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CERTIFICATE OF DESIGNATION SECRETARY OF STATE

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501. Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The	name of the co	poration is:	:Das	2 L;	Son:C	Longal	tants Iv	بحر.
							·	 ,_
2. The	name and stree	t address of	the register	ed agent at	od office is:	Deber	In Fron	<u>~~</u>
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HAVE 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.