

P06000066791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

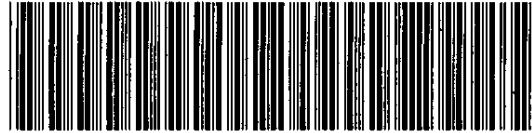
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000074203180

05/10/06--01016--012 **78.75

FILED
06 MAY 12 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PA 8/12

Dec 5/15

COVER LETTER

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

SUBJECT: D.C.S Engineering, 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
CMA# 233

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Sterlyn H Nurse

Name (Printed or typed)

20341 NW 32nd Ct

Address

Opa-Locka, Florida 33056

City, State & Zip

954-588-7673

Daytime Telephone number

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

CINCINNATI OH 45999-0038

In reply refer to: 0244106247
Dec. 24, 2003 LTR 147C
65-0622000 200212 02 000
Input Op: 0244106247 02478
BODC: SB

D C S ENGR INC
PO BOX 1509
FT LAUDERDALE FL 33302-1509095

Employer Identification Number: 65-0622000

Dear Taxpayer:

Thank you for the inquiry of Dec. 15, 2003.

This letter is being sent to verify that we have assigned the above employer identification number to your company.

If you have any questions, please call us toll free at 1-800-829-0115.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number () _____ Hours _____

We apologize for any inconvenience we may have caused you, and thank you for your cooperation.

Sincerely yours,



Sandy Ellison, Dept. Manager
Accounts Management Operations

Enclosure(s):
Copy of this letter

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:

D.C.S Engineering, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

P.O Box 1509 Fort Laudadale FL 33302

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Training,Engineering,Installation,Consulting & Construction

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

S.H Nurse

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Sterlyn Nurse, 20341 NW 32nd Ct Opa-Locka, Fl.33056

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sterlyn Nurse, 20341 NW 32nd Ct Opa-Locka, Fl.33056


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/Registered Agent

5/5/06

Date



Signature/Incorporator

5/5/06

Date

FILED
06 MAY 12 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA