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| PICK-UP | ☐ WAIT | MAIL | | |
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| (Business Entity Name) | | | | |
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| (Document Number) | | | | |
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| Certified Copies | _ Certificates | of Status | | |
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| Special Instructions to | Filing Officer: | | | |
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Office Use Only



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COVER LETTER

Department of State Division of Corporations P. O. Box **632**7 Tallahassee, FL 32314

| SUBJECT: DBL | .CB Enterprise Inc. | | |
|----------------------|-------------------------------------|----------------------------|------------------|
| 74 | (PROPOSED CORPORAT | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| | | | |
| | | | |
| Enclosed are an orig | ginal and one (1) copy of the artic | cles of incorporation and | d a check for: |
| | | | |
| \$70.00 | \$78.75 | \$78.75 | \$87.50 |
| Filing Fee | Filing Fee | Filing Fee | Filing Fee, |
| | & Certificate of Status | & Certified Copy | Certified Copy |
| | | | & Certificate of |
| | + | | Status |
| | | ADDITIONAL CO | DPY REQUIRED |
| | | | |
| | | | |
| | | | |
| FROM: R | obert C Poulsom | | |
| | Name (| (Printed or typed) | |
| | | | |
| | 10035 Chiana Circle | | |
| | A | Address | |
| | | | |
| | Fort Myers, Florida 339 | 05 | |
| | City, | State & Zip | |
| | 000 005 0000 | | |
| | 239-935-9982 | 1 1 1 | |
| | Daytime 17 | elenhone 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)

ÀRTICLE I NAME

The name of the corporation shall be:

DBLCB Enterprise Inc.

FILED

06 MAY 17 PM 4: 20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

10035 Chiana Circle Fort Myers, Florida 33905

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Doing Business in state of Florida, Home Improvements

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Robert C Poulsom---President 10035 Chiana Circle Fort Myers, Florida 33905

ARTICLE VI REGISTERED AGENT

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

Carrie Mountain---Secretary 10035 Chiana Circle Fort Myers, Florida 33905

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Robert C Poulsom 10035 Chiana Circle Fort Myers, Florida 33905

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 familiarly ith and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

ROB

5/1/06

Date

∕Date: