

P06000080327

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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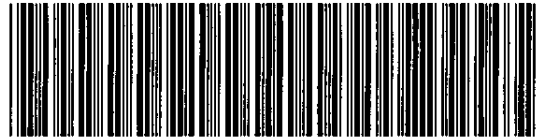
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2006 JUN 12 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 JUN 12 2006

COVER LETTER

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

SUBJECT: DAYSON PRODUCTS, 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: PATRICK O. SMITH
Name (Printed or typed)

2700 GLADES CIRCLE STE. 125
Address

WESTON FL 33327
City, State & Zip

954 384 9916
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:

DAY JON PRODUCTS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2700 GLADES CIRCLE STE. 125
WESTON FL 33327

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRADING & BUSINESS SERVICES.

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):

PATRICK O. SMITH - DIRECTOR

ARTICLE VI REGISTERED AGENT

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

PATRICK O. SMITH
4111 CASCADE TERRACE
WESTON FL 33332

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PATRICK O. SMITH
4111 CASCADE TERRACE
WESTON FL 33332

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

Signature/Incorporator

Date

Date

2006 JUN 12 PM 3:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED