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(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
ALLAHASSEE, FLORIE

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COVER LETTER

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

SUBJECT: DBP	PB, INC (PROPOSED CORPORA)	PE NAME – MUST INCL	UDE SUFFIX)		
England on an aria	· ·		_		
enclosed are an ong	inal and one (1) copy of the artic	cies of incorporation and	a cneck for:	7	
\$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 REQU			1		
FROM: P	ATRICIA M. BATH		- P vo		
Name (Printed or typed)			ECI LL/	<u>ا</u>	
20500 COT RD, #314		AHAS:	2	FILED	
	A	ddress	SEE	70	щ
	LUTZ, FL 33558	N.A. 0. 72:)F STATE , FLÜRIDA	06 JUN 4 PH 2: 33	D
	City, s	State & Zip	RID/	Ξ	
	813-932-4351				
•	Daytime Te	elephone number	VII '		

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:

DBPB, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

20500 COT RD, #314 LUTZ, FL 33558

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE OFFICE SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DANNY J. BATH, 20500 COT RD, #314, LUTZ, FL 33558-PRESIDENT
PATRICIA M. BATH, 20500 COT RD, #314, LUTZ, FL 33558-VICE PRESIDENT/SECRETARY

ARTICLE VI REGISTERED AGENT

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

DANNY J. BATH 20500 COT RD, #314 LUTZ, FL 33558

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PATRICIA M. BATH 20500 COT RD, #314 LUTZ, FL 33558

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

alreca M. LAG

Signature/Incorporator

Date

Date

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