

PO6 0000 88787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

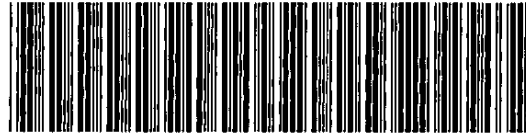
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000076427540

06/23/06--01009--007 **87.50

FILED
06 JUL -3 AM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

pa

COVER LETTER

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

SUBJECT: Dealer Menu Services 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: Dealer Menu Services Inc.
Name (Printed or typed)

118 Black Olive Crescent
Address

Royal Palm Beach, FL 33411
City, State & Zip

561-351-9955
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 26, 2006

DEALER MENU SERVICES INC.
118 BLACK OLIVE CRESCENT
ROYAL PALM BEACH, FL 33411

SUBJECT: DEALER MENU SERVICES INC.
Ref. Number: W06000028780

We have received your document for DEALER MENU SERVICES INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call 850-245-6062.

Paisley A Alford
New Filing Section
Division of Corporations

Letter Number: 106A00042153

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:

Dealer Menu Services Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

118 Black Olive Crescent
Royal Palm Beach, FL 33411

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Internet and Printed Auto Dealership Menus and Consulting

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):

President : Barry Shrode 118 Black Olive Crescent Royal Palm Beach, FL 33411
V. Pres: Harvey Lustig 7888 New Holland Way Boynton Beach, FI 33437
Sect./Treas.: Harvey Lustig 7888 New Holland Way Boynton Beach, FI 33437

ARTICLE VI REGISTERED AGENT

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

Barry Shrode 118 Black Olive Crescent Royal Palm Beach, FL 33411

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Barry Shrode 118 Black Olive Crescent Royal Palm Beach, FL 33411


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

6-29-06

Date



Signature/Incorporator

6-29-06

Date

FILED
06 JUL -3 AM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA