

Page 1 of 2

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000228785 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0381

Account Name : FLORIDA INCORPORATORS, INC.

Account Number: 075350000473

: (813)632-7882

Fax Number : (305)402-3141

FLORIDA PROFIT/NON PROFIT CORPORATION

Diversified Services and Systems Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

Page 2 of 2

FILED

06 SEP 18 AM 10: 43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H06000228785

Articles Of Incorporation

02

Diversified Services and Systems Inc.

THE UNDERSIGNED, ACTING AS INCORPORATOR OF A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION:

FIRST: The name of the corporation is Diversified Services and Systems Inc.

SECOND: The period of its duration is perpetual.

THIRD: The date and time of the commencement of the corporate existence shall be the date of the filing of these Articles by the Department of State.

FOURTH: The purpose or purposes for which the corporation is organized is to engage in the transaction of any or all lawful business for which the corporation may be incorporated under the provisions of the Florida Business Corporation Act.

FLORIDA INCORPORATORS, INC. 8875 Hidden River Pkwy, Ste 300 1 Tampa, FL 33637 (813) 632-7882

H06000228785

' پ

H06000228785

FIFTH: The aggregate number of shares which the corporation shall have authority to issue is CNE THOUSAND (1,000) SHARES of capital steek, \$1.00 par value each.

SIXTH: The number of directors constituting the initial Board of Directors of the corporation is ONE (1) and the name and address of the person who is to serve as director until the first annual meeting of shareholders or until his successor is elected and qualified is:

Michael E. Mallek 1017 Wildmere Cove. LONGWOOD, FL 32750

SEVENTE: The name and address of the incorporator is:

Michael E. Mallek 1017 Wildmers Cove. LONGWOOD, FL 32750

EIGHTH: The name and address of the initial registered agent and the initial registered office is:

2

H06000228785

H06000228785

Michael E. Mallek 1017 Wildmers Cove. LONGWOOD, FL 32750

NINTE: The mailing address and principal office of

the corporation is:

Diversified Services and Systems Inc. 1017 Wildmere Cove. LONGWOOD, FL 32750

DATED: September 15, 2006

Michael E. Mallek Incorporator

ACCEPTANCE OF REGISTERED AGENT

I hereby am familiar with and accept the duties and responsibilities as registered agent of the corporation.

Michael E. Mallek

FILED

SECRETARY OF STATE
SECRETARY OF STATE

3

H06000228785