

P07000057232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

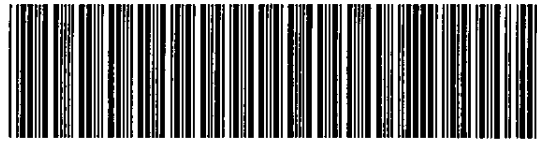
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/05/07--01032--012 **78.75

FILED
07 MAY -9 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PA

COVER LETTER

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

SUBJECT: Dry Choice Restoration 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: Nigel Alston
Name (Printed or typed)

965 NOB Hill Rd #185
Address

Plantation, FL 33324
City, State & Zip

754. 246. 7103
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 17, 2007

NIGEL ALSTON
965 NOB HILL RD #185
PLANTATION, FL 33324

SUBJECT: DRY CHOICE RESTORATION INC
Ref. Number: W07000016806

We have received your document for DRY CHOICE RESTORATION INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 850-245-6052.

Paisley A Alford
New Filing Section
Division of Corporations

Letter Number: 607A00023165

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:

Dry Choice Restoration Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

965 Nob Hill Rd #185
Plantation, FL 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Water Damage Restoration

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):

Nigel Alston President
965 Nob Hill Rd #185
Plantation FL 33324

ARTICLE VI REGISTERED AGENT

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

Nigel Alston
1340 NW 93rd Terr
Plantation FL 33322

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Nigel Alston
1340 NW 93rd Terr, Plantation, FL 33322
954 246-7103

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

FILED
07 MAY 19 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA