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SECRETARY OF STATE
TALLAHASSEE, FLORIGA

COVER LETTER

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

SUBJECT: Donald Gearity, Inc		
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and	l a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	√ \$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM: Don Gearity		
Name	(Printed or typed)	
5707 North Branch Avenu	e	
	Address	
Tampa, Florida 33604		
City,	State & Zip	
813-294-1669		
Daytime T	elephone 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:

Donald Gearity, Inc.



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5707 North Branch Avenue Tampa, Florida 33604

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For Profit

ARTICLE IV SHARES

The number of shares of stock is:

1500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Donald Gearity 5707 North Branch Avenue Tampa, FL 33604

ARTICLE VI REGISTERED AGENT

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

Donald Gearity 5707 North Branch Avenue Tampa, FL 33604

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Donald Gearity 5707 North Branch Avenue Tampa, FL 33604

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I amfamiliar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent Incorporator

Date

7-6-07

Signature/Incorporator

Date