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(Address)

(City/State/Zip/Phone #)

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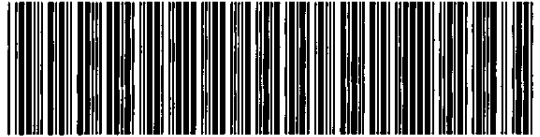
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 JAN -3 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 27, 2007

JOHN BIANCULLI
5789 SW 89TH PL
OCALA, FL 34476

SUBJECT: DATABASE SERVICES GROUP, INC.
Ref. Number: W07000062066

We have received your document for DATABASE SERVICES GROUP, INC. and your check(s) totaling \$125.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note the money amounts differ on the check. Please send a corrected check for the proper amount. The correct amount is \$128.75.

If you have any questions concerning the filing of your document, please call (850) 245-6924.

Stacy Prather
Document Specialist Supervisor

Letter Number: 207A00071673

TRANSMITTAL LETTER

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

SUBJECT: Certificate of Domestication

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	<u>\$78.75</u>
Total to domesticate and file	<u>\$128.75</u>

OPTIONAL:

Certificate of Status	\$ 8.75
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FROM:

John Bianculli

Name (printed or typed)

5789 SW 89th PL

Address

OKLA, FL, 34476

City, State & Zip

352-266-3251 352-351-3383

Daytime Telephone Number

CERTIFICATE OF DOMESTICATION

The undersigned, John T Biancelli, President
(Name) (Title)

of Data Base Services Group, Inc. a foreign corporation
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was April 2^d, 2002.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was New York State.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Data Base Services Group, Inc.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is Data Base Services Group, Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was NEW YORK STATE
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am John Biancelli, of Data Base Services Group, Inc. now residing in Ocala, FL
and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 17th day of December, 2007.

John T Biancelli
(Authorized Signature)

Filing Fee:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

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ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

DataBase Services Group, Inc

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

5789 SW 89th PL., Ocala, FL 34476

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

computer programming services

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

200

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TALLAHASSEE, FLORIDA

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

JOHN BIANCUCCI - President
5789 SW 89th PL.
Ocala, FL 34476

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

JOHN BIANCUCCI
5789 SW 89th PL
Ocala, FL 34476

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

JOHN BIANCUCCI
5789 SW 89th PL
Ocala, FL 34476

HAVING BEEN NAMED AS REGISTERED AGENT AND 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

Date

Signature/Incorporator

Date