

P08000008710

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

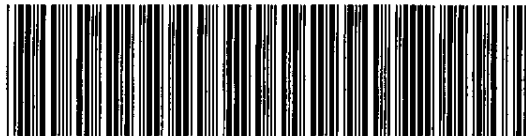
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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01/23/08--01008--011 \*\*78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 JAN 23 AM 9:54

EP 1/25/08

## COVER LETTER

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

SUBJECT: D & K 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: Kimberly J. Egyed  
Name (Printed or typed)

12139 Lacey Drive  
Address

New Port Richey, FL 34654  
City, State & Zip

727-857-1189  
Daytime Telephone 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:

D & K Services, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

12139 Lacey Drive  
New Port Richey, FL 34654

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any Lawful Business Under State Law

## ARTICLE IV SHARES

The number of shares of stock is:

Seven Thousand Five Hundred (7,500)

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

David M. Egyed - PD  
Kimberly J. Egyed - STD

## ARTICLE VI REGISTERED AGENT

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

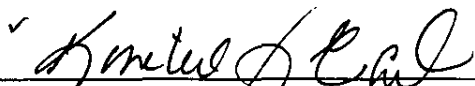
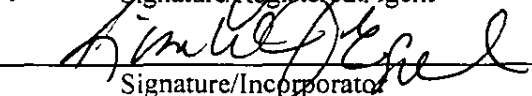
Kimberly J. Egyed  
12139 Lacey Drive  
New Port Richey, FL 34654

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kimberly J. Egyed  
12139 Lacey Drive  
New Port Richey, FL 34654

\*\*\*\*\*  
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

1/18/2008

Date

1/18/2008

Date

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 JAN 23 AM 9:54