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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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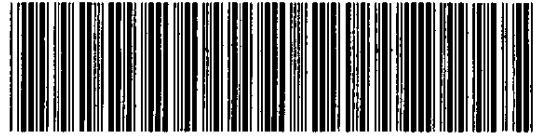
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/1/08

COVER LETTER

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

SUBJECT: Donbar Service Solutions 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: Barry L. Shrode
Name (Printed or typed)

118 Black Olive Crescent
Address

Royal Palm Beach, FL 33411
City, State & Zip

561-351-9955
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:

Donbar Service Solutions Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

118 Black Olive Crescent
Royal Palm Beach, FL 33411

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting Services

ARTICLE IV SHARES

The number of shares of stock is:

Barry L. Shrode	500
Donna J., Shrode	500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Barry L. Shrode 118 Black Olive Crescent Royal Palm Beach, FL 33411
Donna J. Shrode 118 Black Olive Crescent Royal Palm Beach, FL 33411

President
Vice - President

ARTICLE VI REGISTERED AGENT

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

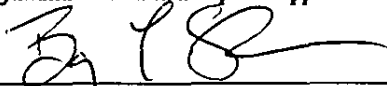
Barry L. Shrode 118 Black Olive Crescent Royal Palm Beach, FL 33411

ARTICLE VII INCORPORATOR

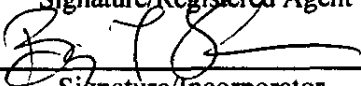
The name and address of the Incorporator is:

Barry L. Shrode 118 Black Olive Crescent Royal Palm Beach, FL 33411

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

7-28-08

Date

7-28-08

Date

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AUG - 1 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA