

PO8000077149

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H08000196345 3))



H080001963453ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

RECEIVED
08 AUG 19 PM 3:14
DIVISION OF CORPORATION

FLORIDA PROFIT/NON PROFIT CORPORATION

DAVISIL ENTERPRISES, INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

FILED
2008 AUG 19 PM 1:05
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

J. Shivers AUG 20 2008

FROM : LAZARUS
017-0301

FAX NO. : 3052201440
8/19/2008 2:28 PAGE 001/001

Aug. 19 2008 03:13PM P2
Florida Dept of State



August 19, 2008

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LAZARUS CORPORATE FILING SERVICE, INC.

SUBJECT: DAVISIL ENTERPRISES, INC.
REF: W08000038783

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The principal address need to be complete.

If you have any further questions concerning your document, please call (850) 245-6062.

Julia Peterson
Regulatory Specialist II
New Filing Section

FAX Aud. #: H08000196345
Letter Number: 408A00046605

H08000196345

ARTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I - NAME

THE NAME OF THE CORPORATION SHALL BE:

DAVISIL ENTERPRISES, INC

ARTICLE II - PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS CORPORATION SHALL BE:

3600 S. State Rd 7
#207
Miramar, FL 33023

ARTICLE III - SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100 (ONE HUNDRED)

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

JOAN QUOMO
104 EDMUND RD
WESTPARK FL 33023

H08000196345

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 AUG 19 PM 1:05

FILED

H08000196345

ARTICLE V - INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

JOAN OJOMO
104 EDMUND RD
WESTPARK FL 33023

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS 18th DAY OF AUGUST, 2008


SIGNATURE

ARTICLE VI - DIRECTOR(S)

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

ADETUNJI OJOMO
OLAJUMOKE ADEBIYI
3600 SOUTH STATE Rd 7
207
MIRAMAR FL 33023


SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 AUG 19 PM 1:05

FILED

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATED TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.


REGISTERED AGENT SIGNATURE

H08000196345