

PO8000098522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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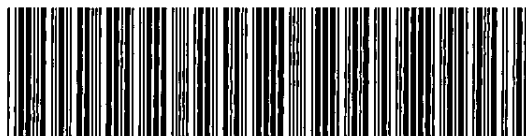
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
CLERK OF COURTS

279

COVER LETTER

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

SUBJECT: D N L Rabbinical 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: Rabbi David Degani
Name (Printed or typed)

12123 Rockwell Way
Address

Boca Raton, FL 33428
City, State & Zip

561-488-8079
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 N L Rabbinical Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

12123 Rockwell Way
Boca Raton, FL 33428

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Cleric Service

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Rabbi David Degani, President
12123 Rockwell Way
Boca Raton, FL 33428

Cantor Lee E. Degani, Director
12123 Rockwell Way
Boca Raton, FL 33428

ARTICLE VI REGISTERED AGENT

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

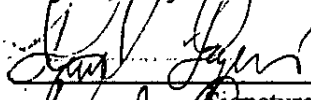
Rabbi David Degani, President
12123 Rockwell Way
Boca Raton, FL 33428

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rabbi David Degani, President
12123 Rockwell Way
Boca Raton, FL 33428

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

10-29-08

Date

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA