

P09000043445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies 1 Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300156012033

05/18/09--01004--023 \*\*T8.75

RECEIVED

09 MAY 18 PM 12:42

STATE OF FLORIDA  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

09 MAY 18 PM 12:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY 18 2009  
D.A. WHITE

## COVER LETTER

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

SUBJECT: DCB Financial Co.  
(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: Jorge del Castillo  
Name (Printed or typed)

1747 Capital Cr. NE 205  
Address

Tallahassee, FL 32308  
City, State & Zip

407-3340575  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

FILED

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

09 MAY 18 PM 12: 59

**ARTICLE I NAME**

The name of the corporation shall be: DCB Financial Co.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

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

1747 Capital Circle NE 205  
Tallahassee, FL 32308

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to sell ~~mort~~.

To sell residence and commercial loan mortgages.

**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):

Jorge del Castillo - President.

1747 Capital Circle NE 205 Tallahassee, FL 32308

**ARTICLE VI REGISTERED AGENT**

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

Jorge del Castillo

1747 Capital Circle NE 205 Tallahassee, FL 32308

**ARTICLE VII INCORPORATOR**

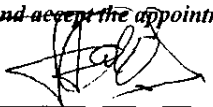
The name and address of the Incorporator is:

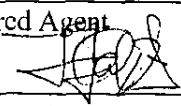
Jorge del Castillo

1747 Capital Circle NE 205 Tallahassee, FL 32308

\*\*\*\*\*

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

05/18/09

Date

05/18/09

Date