

P10000004737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

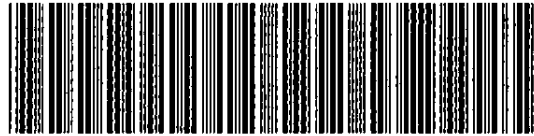
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

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

**SUBJECT:** DDO Technical 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:** Monty Poston

\_\_\_\_\_  
Name (Printed or typed)

15418 Amberbeam Blvd

\_\_\_\_\_  
Address

Winter Garden, FL 34787

\_\_\_\_\_  
City, State & Zip

407-362-1781

\_\_\_\_\_  
Daytime Telephone number

montyposton@yahoo.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

**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:

DDO Technical Services Inc.

## **ARTICLE II    PRINCIPAL OFFICE**

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

15418 Amberbeam Blvd  
Winter Garden, FL 34787

## **ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is:

Computer & Software Services

## **ARTICLE IV    SHARES**

The number of shares of stock is: 500

## **ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s): Monty Poston (CEO)  
15418 Amberbeam Blvd  
Winter Garden, FL 34787

## **ARTICLE VI    REGISTERED AGENT**

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

Monty Poston  
15418 Amberbeam Blvd  
Winter Garden, FL 34787

## **ARTICLE VII    INCORPORATOR**

The name and address of the Incorporator is:

Monty Poston  
15418 AMBERBEAM BLVD  
Winter Garden, FL 34787

\*\*\*\*\*

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

FILED  
10 JAN 15 PM 4:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1/11/10  
\_\_\_\_\_  
Date

1/11/10  
\_\_\_\_\_  
Date