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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

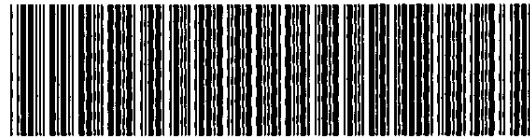
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MD 12/1

## COVER LETTER

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

**SUBJECT: D. COMER, 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 <sup>87.50</sup> Filing Fee  
& Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: DIANA COMER

Name (Printed or typed)

2463 WANETA DR

Address

SARASOTA, FL. 34231

City, State & Zip

941-928-4400

Daytime Telephone number

ROLAND@6585BILL.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: **D. COMER, INC**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
**2463 WANETA DR**  
**SARASOTA, FL 34231**

Mailing address, if different is:  
**P.O. BOX 21689**  
**SARASOTA, FL 34276**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
**INVESTMENTS**

**ARTICLE IV SHARES**

The number of shares of stock is: **100**

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

Name and Title: **DIANA COMER**  
Address: **P.O. BOX 21689**  
**SARASOTA, FL 34276**

Name and Title: **PRESIDENT**  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: **DIANA COMER**  
Address: **2463 WANETA DR**  
**SARASOTA, FL 34231**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **DIANA COMER**  
Address: **2463 WANETA DR**  
**SARASOTA, FL 34231**

*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*

*Diana Comer*

Required Signature/Registered Agent

*11/18/10*

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

*Diana Comer*

Required Signature/Incorporator

*11/18/10*

Date

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