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COVER LETTER

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

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SUBJECT: DAVID SCHER INC				
(PROPOSED CORPORA	ΓΕ NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	a check for:		
5 (7 17				
\$70.00 \$78.75	\$78.75	\$87.50		
Filing Fee Filing Fee	☐Filing Fee	Filing Fee,		
& Certificate of Status	& Certified Copy	Certified Copy		
		& Certificate of		
	ADDITIONAL CO	Status DV DEOLUDED		
	ADDITIONAL CO	r i REQUIRED		
	•			
FROM: DAVID SCHER				
Name	(Printed or typed)			
1018 DEL HARBOUR DE	RIVE #1			
A	Address			
DELRAY BEACH FL	33483 State & Zip			
City,	State & Zip	2011 APR 28 SECRETARY ALLAHASSE		
/249\705.0220		FR TP ™	į	
(248)705-9329 Daytime To	elephone number	20 P	***	
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iselltovs@earthlink.net ✓				
E-mail address: (to be used	I for future annual report r	notification) $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$	•	
		¥		

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 The name of the	, NAME DAVID SCHER INC corporation shall be:	
ARTICLE II	PRINCIPAL OFFICE Principal street address 1018 DEL HARBOUR DRIVE #1 DELRAY BEACH FL 33483	Mailing address, if different is:
	PURPOSE which the corporation is organized is: LEGAL ITEMS.	
ARTICLE V	hares of stock is: 1,000 INITIAL OFFICERS AND/OR DIRECT	Name and Title: Address:
Name and Address:		Name and Title:
Name and Address:	Title:	Name and Title: Address:
	REGISTERED AGENT Clorida street address (P.O. Box NOT accepta DAVID SCHER 1018 DEL HARBOUR DRIVE DEL BAY BEACH EL 33483	## 201 ## \$\vec{\text{\$\exitt{\$\exitt{\$\exitt{\$\exitt{\$\exitt{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\}\$}}}}\$}}}}}}}}}}}}}}}}}}}}}}}}}}}}}
he name and a Name: Address:		PR 28 PI
laving been na his certificate, I	med as registered agent to accept service of p am familiar with and accept the appointment	rocess for the above stated corporation at the place designated as registered agent and agree to act in this capacity 04/15/2011
	Required Signature/Registered Ager cument and affirm that the facts stated here. Department of State constitutes a third degree	t Date n are true. I am aware that the false information submitted in
Υ	Required Signature/Incorporator	04/15/2011 Date