

P1200041449

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

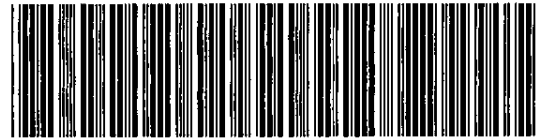
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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05/02/12--01020--010 \*\*70.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 MAY - 2 PM 1:50

Ps 5/3/12

**COVER LETTER**

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

SUBJECT: Douglas Enlow 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

<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: Douglas L. Enlow  
Name (Printed or typed)

6 Meadowfield Ct  
Address

Ormond Beach FL 32174  
City, State & Zip

(386) 334-4909  
Daytime Telephone number

DIGDUG5150@AOL.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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME**

The name of the corporation shall be: Douglas Enlow Inc

12 MAY -2 PM 1:50

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

6 Meadowfield Ct  
Ormond Beach FL 32174

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful business

**ARTICLE IV SHARES**

The number of shares of stock is: 1

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

Name and Title: Douglas Enlow CEO  
Address: 6 Meadowfield Ct  
Ormond Beach FL 32174

Name and Title: N/A  
Address: \_\_\_\_\_

Name and Title: N/A  
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: Douglas Enlow  
Address: 6 Meadowfield Ct  
Ormond Beach FL 32174

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Douglas Enlow  
Address: 6 Meadowfield Ct  
Ormond Beach FL 32174

*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*

Douglas Enlow  
Required Signature/Registered Agent

4-24-12  
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.*

Douglas Enlow  
Required Signature/Incorporator

4-24-12  
Date