

P/200005599/

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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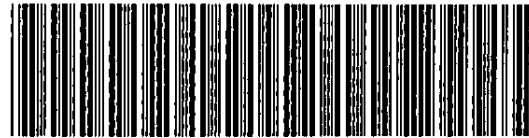
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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06/12/12--01013--001 **78.75

RECEIVED
12 JUN 20 AM 11:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W/2-32211

✓ 06/21/12



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
12 JUN 20 AM 11:46
DIVISION OF STATE
TALLAHASSEE, FLORIDA

June 13, 2012

DEBRA L. SCHWALLER
10180 SE 139TH PLACE
SUMMERFIELD, FL 34491

SUBJECT: DLS ENTERPRISES CORP.
Ref. Number: W12000032211

We have received your document for DLS ENTERPRISES CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L07000118366 (DLS ENTERPRISE, LLC).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 512A00016629

*changed to
DLS Enterprises Corp*

COVER LETTER

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

SUBJECT: DLS Enterprises Corp.

(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: Debra L. Schwaller

Name (Printed or typed)

10180 SE 139th Place

Address

Summerfield, Fl. 34491

City, State & Zip

352-207-6209

Daytime Telephone number

debrasch57@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)

ARTICLE I NAME

The name of the corporation shall be: DLS Enterprises Corp.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
10180 SE 139th Place
Summerfield, FL 34491

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Provide door to door delivery of mail and packages.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Debra L. Schwaller - President</u>	Name and Title: _____
Address: <u>10180 SE 139th Place</u>	Address: _____
<u>Summerfield, FL 34491</u>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: Debra L. Schwaller
Address: 10180 SE 139th Place
Summerfield, FL 34491

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Debra L. Schwaller
Address: 10180 SE 139th Place
Summerfield, FL 34491

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

Debra L. Schwaller

Required Signature/Registered Agent

6/8/2012

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.

Debra L. Schwaller

Required Signature/Incorporator

6/8/2012

Date

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12 JUN 20 AM 11:27
STATE
TALLAHASSEE, FLORIDA