

P12000071488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

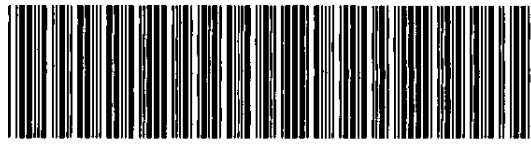
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 AUG 17 AM 7:36

RECEIVED
STATE OF NEW YORK
DEPARTMENT OF TAXATION AND FINANCE

8/20

RHC
ACCOUNTING & TAX SERVICE, INC.

3417 N. Hiatus Road
Sunrise, FL 33351
954-616-6969

August 1, 2012

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32399

Dear Department of State:

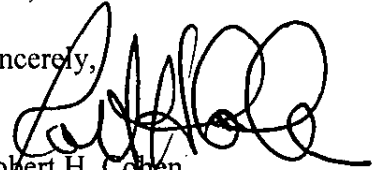
Enclosed please find the articles of Incorporation for:

DM POWER SOLUTIONS, INC

Also enclosed is a check in the amount of \$ 70.00 covering all filing fees.

If you have any questions, please do not hesitate to call me at:
(954) 616-6969

Sincerely,


Robert H. Cohen
RHC Accounting & Tax Service, Inc.
3417 N. Hiatus Rd
Sunrise, FL 33351

**Article VI
Initial Board of Directors and Officers**

There will be one (1) initial director and incorporator

The name of the initial director and incorporator is:

David Mallen

The address of the initial director and incorporator is:

8958 W. Sample Rd
Coral Springs, FL 33065

David Mallen, Incorporator & Director

David Mallen

Dated this 14 day of Aug, 2012

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SECRETARY OF STATE
STATE OF FLORIDA

CERTIFICATE DESIGNATING PLACE OF BUSINESS FOR THE SERVICE
OF PROCESS WITHIN THIS STATE NAMING AGENT UPON WHOM

PROCESS MAY BE SERVED

In pursuance to chapter 48.901, Florida statues, the following is submitted

In compliance with said act:

DM POWER SOLUTIONS, INC.

Desiring to organize under the laws of the State of Florida, with its principal
office as indicated in the articles of incorporation, in the city of Coral Springs
has named David Mallen to accept service of process in the
State of Florida.

Having been named to accept service of process for the above stated
Corporation, at a place designated in this certificate, I hereby accept to
Act in this capacity and agree to comply with the provisions of said act relative to
keeping open said office.

By: Agent- _____

David Mallen Agent

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STATE OF FLORIDA

COUNTY OF BROWARD

I hereby certify that on this 14 day of AUG, 2012, before me

Personally appeared:

David Mallen

Incorporator & Director of

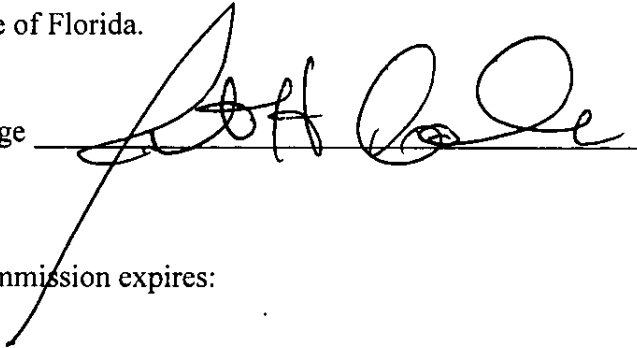
DM POWER SOLUTIONS, INC

Under the laws of the State of Florida, to me known to be the person/persons described in and who executed the foregoing instrument and severally acknowledge the execution thereof to be their free act and deed as directors, for the uses and purposes therein mentioned: and the said instrument is the act and deed of said corporation.

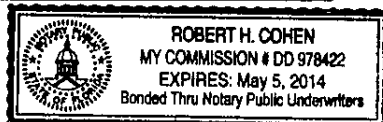
Witness my signature and official seal on 8/14, 2012 in the county of

Broward and the State of Florida.

Notary-Public At-Large
State of Florida



Official Seal: My Commission expires:



12 AUG 17 AM 7:36

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