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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
O'DARBY PARTNERS INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

I. Burch MAR 29 2013

COVER LETTER

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

SUBJECT: o'darby partners 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

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Sharon Babala

Name (Printed or typed)

c/o BlumbergExcelsior Corporate Services, Inc.

Address

236 Broadway, Menands, NY 12204

City, State & Zip

800-999-0850

Daytime Telephone number

slb@blumb.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: O'DARBY PARTNERS INC.

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is:

301 West Platt Street #126

Tampa, FL 33606

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Consulting

ARTICLE IV SHARES 200
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kimberly A. O'Brien, Pres.

Address

301 West Platt St. #126
Tampa, FL 33606

Name and Title: Carlton E. Darbyshire, VP

Address:

301 West Platt St. #126
Tampa, FL 33606

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

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13 MAR 28 PM 4:49
TAMPA FL 33606
SECRETARY OF STATE

(cont.)

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

ARTICLE VI REGISTERED AGENTThe ~~name and Florida street address~~ (P.O. Box NOT acceptable) of the registered agent is:

Name: Kimberly A. O'Brien
Address: 301 West Platt St. #126
Tampa, FL 33606

ARTICLE VII INCORPORATORThe ~~name and address~~ of the incorporator is:

Name: Sharon Babala
Address: 236 Broadway
Menands, NY 12204

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.

[Signature]
Required Signature/Registered Agent

3/28/2013
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 § 817.155, F.S.

[Signature]
Required Signature/Incorporator

3/28/13
Date

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DEPARTMENT OF STATE
TAMPA, FL 33606