

P/30000038403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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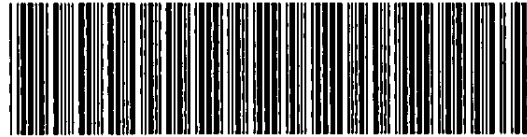
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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1/4

## COVER LETTER

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

SUBJECT: D&F Electric Maintenance Service, 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: Phoebe Miller  
Name (Printed or typed)

1870 NW 35th Ave.  
Address

Ft. Lauderdale, FL 33311  
City, State & Zip

954 839 5387  
Daytime Telephone number

fabulousforlife@yahoo.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: **D&F Electric Maintenance Service, Inc.**

**FILED**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1870 NW 35th Ave.  
Ft. Lauderdale, FL 33311

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Mailing address, if different is:

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: <u>Phoebe Miller, President, Secretary</u>	Name and Title: <u>Devon Britton, VP, Treasurer</u>
Address: <u>1870 NW 35th Ave.</u>	Address: <u>2874 Victorio St.</u>
<u>Ft. Lauderdale, FL 33311</u>	<u>Port St. Lucie, FL 34953</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: Phoebe Miller  
Address: 1870 NW 35th Ave  
Ft. Lauderdale, FL 33311

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Phoebe Miller  
Address: 1870 NW 35th Ave  
Ft. Lauderdale, FL 33311

*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*

Phoebe Miller

Required Signature/Registered Agent

4-23-13

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.*

Phoebe Miller

Required Signature/Incorporator

4-23-13

Date