## P13000064992

(Requestor's Name)			
(Address)			
(Address)			
(Addiess)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Dusiness Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
<u></u>			

Office Use Only



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SECRETARY OF STATE
AND ANASSEE, FLORIDA

MRD/13

## **COVER LETTER**

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

SUBJECT: DRMB, INC		
	TE NAME – <u>MUST INCLI</u>	JDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and	l a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED

FROM	Donna R. Moore-Boatwright			
TROM	Name (Printed or typed)			
	612 Arlington Court			
	Address			
	Eustis, FL 32726			
	City, State & Zip			
	352/217-4465			
	Daytime Telephone number			
	k1297b@aol.com			

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)

The name of the corporat	tion shall be: DRME	B, INC	FI	LED
	NCIPAL OFFICE		13 AUG	-2 PM 12: 5
612 Arlingto	Principal <u>street</u> address		Mailing address, if different SECRETA	RY OF STATE
			TALLAHAS	SSEE FLORIDA
Eustis, FL	32726			
ARTICLE III PUR. The purpose for which to	<b>POSE</b> he corporation is organiz	red is: Occup	pational Therapist Serv	vices
				11 - 12 - 13 - 14 - 14 - 14 - 14 - 14 - 14 - 14
		<u> </u>		
ARTICLE IV SHA	RES 10 000	,		
The number of shares of	stock is: 10,000			
	CIAL OFFICERS AND		<u>RS</u>	
Name and Title	Donna R. Moore-		Name and Title:	<del></del>
Address	612 Arlingto	n Court	Address:	
	Eustis, FL	32726		· · · ·
Name and Title:			Name and Title:	
Address			Address:	
			<del></del>	
Name and Title:			Name and Title:	
Address		····	Address:	

	Name and	Title:	Name and Title:	LIFED
	Address		Address:	13 AUG -2 PM 12: 5:
				SECRETARY OF STATE TALLAHASSEE, FLORIDA
			· .	
	ARTICLE VI	REGISTERED AGENT  rida street address (P.O. Box NOT acceptable) of	P+1	
		Donna R. Moore-Boatwright	the registered agent is	•
	Name:	612 Arlington Court		
	Address:	Eustis, FL 32726	-	
		***************************************	•	
	ARTICLE VII	INCORPORATOR		
	The name and add	dress of the Incorporator is:		
	Name:	Donna R. Moore-Boatwright		
	Address:	612 Arlington Court	•	
		Eustis, FL 32726	_	
	Having been nam	ed as registered agent to accept service of process	for the above stated (	corporation at the place designated in
	this cartificate, I a	m familiar with and accept the appointment as reg	istered agent and agre '	ee to act in this capacity
Χ	Long	C Howksalmy A	OM-	07/01/2013
		Required Signature/Registered Agent	•	Date
	I submit this docu document to the D	ment and affirm that the facts stated herein are epoxtment of State constitutes a third degree felon	true. I am aware that y as provided for in s.	the false information submitted in a 817.155, F.S.
Х	Some,	P. Mon-Barty ONG		07/01/2013
		Required Signature/Incorporator		Date
		V		