

P/3000100124

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

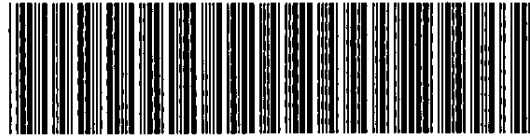
(Business Entity Name)

(Document Number)

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

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13 DEC 16 PM 4:26  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

*12/17/13*

## COVER LETTER

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

SUBJECT: DONOVAN & Gray Auctions, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status  
**ADDITIONAL COPY REQUIRED**

FROM: John Finger  
Name (Printed or typed)  
619 Sunset Rd.  
Address  
West Palm Beach, FL 33401  
City, State & Zip  
561-718-7291  
Daytime Telephone number  
jafiii@bellsouth.net  
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: DONOVAN & Gray Auctions Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

3728 Georgia Ave 1B

West Palm Beach, Fl.

33405

Mailing address, if different is:

619 Sunset Rd.

West Palm Bch, Fl.

33401

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ALL Legal Business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gregory Chappell President

Address 1500 Normandy Rd.

Ann Arbor, MI

48103

Name and Title: John Finger Vice President

Address: 619 Sunset Rd.

West Palm Beach, Fl.

33401

Name and Title: Debra Chappell Treasurer

Address 1500 Normandy Rd.

Ann Arbor, MI

Name and Title: Louise Pinson Secretary

Address: 619 Sunset Rd.

West Palm Beach, Fl.

33401

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

13 DEC 16 PM 4:26  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

(conti.)

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: John Finger

Address: 619 Sunset Rd.

West Palm Beach, FL 33401

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: John Finger

Address: 619 Sunset Rd.

West Palm Beach, FL 33401

*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*

L. A. Fajin  
Required Signature/Registered Agent

12/12/13  
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.*

L. A. Fajin  
Required Signature/Incorporator

12/12/13  
Date