

P14 000020756

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

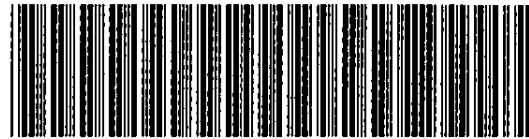
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR -3 PM 12:42

B 3/7/14

COVER LETTER

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

SUBJECT: dDCK, 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: Michael Hudgins

Name (Printed or typed)

31651 Skyline Drive

Address

Deland, FL 32720

City, State & Zip

(352) 669-8574

Daytime Telephone number

mhudgins@ddcklabs.org

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: dDCK, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

31651 Skyline Drive

Deland, FL 32720

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

A: To provide professional technology-based products and services

B: To design, create and distribute entertainment products

C: To engage in any lawful act or activity for which corporations may be formed

D:

ARTICLE IV SHARES

The number of shares of stock is: 99

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Hudgins, Executive Director

Name and Title: _____

Address 31651 Skyline Drive

Address: _____

Deland, FL 32720

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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DIVISION OF CORPORATIONS
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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: Michael Hudgins

Address: 31651 Skyline Drive

Deland, FL 32720

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ARTICLE VII INCORPORATOR

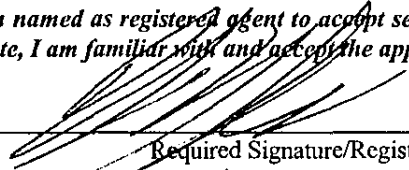
The name and address of the Incorporator is:

Name: Michael Hudgins

Address: 31651 Skyline Drive

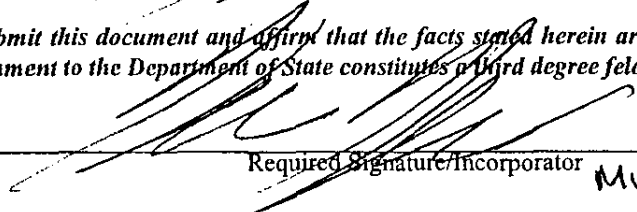
Deland, FL 32720

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


Required Signature/Registered Agent Michael Hudgins

2/26/14
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.


Required Signature/Incorporator Michael Hudgins

2/26/14
Date

2/27/14

Florida Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

To whom it may concern:

I mailed the original and a copy of the attached yesterday but forgot to include the payment. Please find enclosed the check for dDCK, Inc.

Thank you

Michael Hudgins