

PLA000079849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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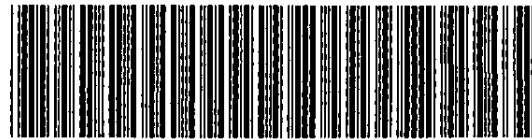
(Business Entity Name)

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W14-50486

COVER LETTER

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

SUBJECT: **DB Services, 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: **Paul Bayless**

Name (Printed or typed)

3130 Palm Trace Landings Dr. #602

Address

Davie, FL 33314

City, State & Zip

561-866-1835

Daytime Telephone number

paulizumi@bellsouth.net

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

Document #

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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: DB Services, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3130 Palm Trace Landings Dr. #602
Davie, FL 33314

Mailing address, if different is:

PO Box 291264
Davie, FL 33329-1264

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: concrete preparation

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Paul Bayless, President

Address: 3130 Palm Trace Landings Dr.
#602
Davie, FL 33314

Name and Title: Izumi Bayless, Treasurer

Address: 3130 Palm Trace Landings Dr.
#602
Davie, FL 33314

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

14 SEP -9 AM 9:13
SECRET
FBI
LABORATORY

(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: Paul Bayless
Address: 3130 Palm Trace Landings Dr
#602 Davie, FL 33314

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Paul Bayless
Address: 3130 Palm Trace Landings Dr. #602
Davie, FL 33314

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

Paul Bayless 8-15-14
Required Signature/Registered Agent 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.

Paul Bayless 8-15-14
Required Signature/Incorporator Date

14 SEP -9 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA