

10/2/2014

From: (850)6176381

Division of Corporations

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**P14000081297**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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FLORIDA PROFIT/NON PROFIT CORPORATION

DDSL Inc

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

*10/03/14*

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TALLAHASSEE, FLORIDA

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## COVER LETTER

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

**SUBJECT:** DDSL 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:** Dustin LaChance

Name (Printed or typed)

8248 Eagles Park Drive North

Address

St. Petersburg, FL 33709

City, State & Zip

727-709-2103

Daytime Telephone number

dustinelachance@gmail.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: DDSL Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

8248 Eagles Park Drive North

St. Petersburg, FL 33709

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: see attached.

**ARTICLE IV SHARES**

The number of shares of stock is: 1

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

Name and Title: Dustin LaChance

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

Address 8248 Eagles Park Drive North

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

St. Petersburg, FL 33709

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

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

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

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

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TALLAHASSEE, FLORIDA

(cont.)

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: C T Corporation System  
 Address: 1200 South Pine Island Road  
Plantation, FL 33324

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 TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Name: Dustin LaChance  
 Address: 8248 Eagles Park Drive North  
St. Petersburg, FL 33709

*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*

By:  C T Corporation System Jordan Brown, Assistant Secretary 10/2/2014  
 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.*

 9/29/2014  
 Required Signature/Incorporator Date  
 Dustin LaChance