P15000074798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

W15-053865

900275488919

08/06/15--01034--002 **78.75

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 SEP 14 AM 10:10

09/15/15

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED SEP 14 2015

August 28, 2015

LYNNE IMPERATO
66-66 GRAND AVENUE
MASPETH, NY 11378

*** 2ND CORRECTION ***

SUBJECT: DATA SYSTEMS, INC.
Ref. Number: W15000053865

We have received your document for DATA SYSTEMS, INC. and your check(s) totaling $78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P11000107845 (DATA SYSTEMS INC.).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 015A00016858

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED AUG 28 2015

August 11, 2015

LYNNE IMPERATO
66-66 GRAND AVENUE
MASPETH, NY 11378

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Ref. Number: W15000053865

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Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 015A00016858

COVER LETTER

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

SUBJECT: DATA SYSTEMS, 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: LYNNE IMPERATO
Name (Printed or typed)

66-66 GRAND AVENUE
Address

MASPETH, NY 11378
City, State & Zip

718-672-2500
Daytime Telephone number

LYNNE@IMPERATO.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: DATA DESIGN SYSTEMS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address	Mailing address, if different is:
6520 FLORIDANA AVENUE	
MELBOURNE BEACH, FL 32951	

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: COMPUTER PROGRAM AND DESIGN SERVICES

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ARTICLE IV SHARES
The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	CLARE FOGLE-PRESIDENT	Name and Title:	
Address	6520 FLORIDANA AVENUE	Address:	
	MELBOURNE BEACH, FL 32951		
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	

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: CLARE FOGLE

Address: 6520 FLORIDANA AVENUE

MELBOURNE BEACH, FL 32951

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ARTICLE VII INCORPORATOR

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

Name: IMPERATO TAX SERVICES, INC.

Address: 66-66 GRAND AVENUE

MASPETH, NY 11378

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Clare Fogle
Required Signature/Registered Agent

7/28/15
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.

Lynne Imperato
Required Signature/Incorporator

7/28/15
Date