

P/6000 25771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

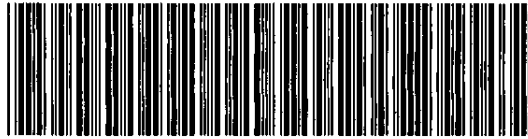
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100283267901

03/14/16--01016--005 **87.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 MAR 14 AM 10:40

MAR 22 2016

T. SCOTT

COVER LETTER

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

SUBJECT: DMA FINANCIAL 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: CARI A. SHEERIN
Name (Printed or typed)

153 WATERFORD - G
Address

DELRAY BEACH, FL 33446
City, State & Zip

561-706-7722
Daytime Telephone number

BUYERMANDATE@LIVE.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: DMA FINANCIAL SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

153 WATERFORD - G
DELRAY BEACH FL. 33446

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ACCOUNTING AND MONEY
DISBURSEMENTS FOR U.S. MERCHANT ACCOUNTS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title

CARL A. SHEERIN

Name and Title

PRESIDENT

Address

153 WATERFORD - G
DELRAY BEACH
FL. 33446

Address:

(SAME)

Name and Title

DAVID M. PECK

Name and Title

VICE PRESIDENT

Address

P.O. Box 110464
BRADENTON
FL. 34211

Address:

(SAME)

Name and Title

CARL A. SHEERIN

Name and Title

TREASURER

Address

153 WATERFORD - G
DELRAY BEACH
FL. 33446

Address:

(SAME)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 MAR 14 AM 10:40

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: CARL A. SHEERIN
Address: 153 WATERFORD - G
DELRAY BEACH FL. 33446

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CARL A. SHEERIN
Address: 153 WATERFORD - G
DELRAY BEACH FL. 33446

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 1/1/2016 (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

Carl A. Sheerin
Required Signature/Registered Agent

3/10/2016
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.

Carl A. Sheerin
Required Signature/Incorporator

3/10/2016
Date