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Doreen A. Everett

127 HEDGEGROVE AVE Satellite Beach, FL 32937 thedwgboard@yahoo.com

October 30, 2019

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Document Number P1900000716

doren a exercit

The Drawing Board Corp.

Dear Sir or Madam:

The above referenced corporation has been administratively dissolved and I am sending this letter as an affidavit that I will not attempt to reinstate it. Instead, I am attaching the Articles of Corporation for a new corporation that has the same name, along with the required \$70 fee.

Sincerely,

Doreen A. Everett

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

	······		
<u>CLE II PRINC</u>	Principal street address	Mailing address, if	different is:
<u>EDGEGROVE A</u>			
ite Beach, FL 329	137		
CLE III PURPO rpose for which the	he corporation is organized is: Any ar	nd all lawful business activity.	
CLE IV SHARI unber of shares of	stock is:		
imber of shares of	stock is: **LOFFICERS AND/OR DIRECTOR** Doreen A. Everett, President		
imber of shares of	Stock is: LOFFICERS AND/OR DIRECTOR Doreen A. Everett, President 127 HEDGEGROVE AVE	Σ	
omber of shares of CLE V INITIA Name and Title	Stock is: LOFFICERS AND/OR DIRECTOR Doreen A. Everett, President 127 HEDGEGROVE AVE	Name and Title:	
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umber of shares of CLE V INITIA Name and Title Address	LOFFICERS AND/OR DIRECTOR Doreen A. Everett, President 127 HEDGEGROVE AVE Satellite Beach, FL 32937	Name and Title:	
Name and Title Name and Title	LOFFICERS AND/OR DIRECTOR. Doreen A. Everett, President 127 HEDGEGROVE AVE Satellite Beach, FL 32937	Name and Title:	
umber of shares of CLE V INITIA Name and Title Address	LOFFICERS AND/OR DIRECTOR Doreen A. Everett, President 127 HEDGEGROVE AVE Satellite Beach, FL 32937	Name and Title:	
Name and Title Name and Title	LOFFICERS AND/OR DIRECTOR. Doreen A. Everett, President 127 HEDGEGROVE AVE Satellite Beach, FL 32937	Name and Title:	
Name and Title Name and Title	LOFFICERS AND/OR DIRECTOR. Doreen A. Everett, President 127 HEDGEGROVE AVE Satellite Beach, FL 32937	Name and Title: Address: Name and Title: Address:	
Name and Title Name and Title	LOFFICERS AND/OR DIRECTOR. Doreen A. Everett, President 127 HEDGEGROVE AVE Satellite Beach, FL 32937	Name and Title: Address: Name and Title: Address:	
Name and Title Name and Title Address	Stock is: **AL OFFICERS AND/OR DIRECTOR** Doreen A. Everett, President 127 HEDGEGROVE AVE Satellite Beach, FL 32937	Name and Title: Address: Name and Title: Address:	
Name and Title Name and Title Address	LOFFICERS AND/OR DIRECTOR Doreen A. Everett, President 127 HEDGEGROVE AVE Satellite Beach, FL 32937	Name and Title: Name and Title: Name and Title: Address: Name and Title:	
Name and Title: Address Name and Title: Address	Stock is: **AL OFFICERS AND/OR DIRECTOR** Doreen A. Everett, President 127 HEDGEGROVE AVE Satellite Beach, FL 32937	Name and Title: Name and Title: Name and Title: Address: Name and Title:	

Name :	and Title:	Name and Title:
Addre	ess	Address:
ARTICLE VI		
The <u>name and</u>	Florida street address (P.O. Box NOT acceptab	le) of the registered agent is:
Name:	Doreen A. Everett	
Address:	127 HEDGEGROVE AVE	
	Satellite Beach, FL 32937	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	
The <u>name and a</u>	address of the Incorporator is:	
Name:	Doreen A. Everett	
Address:	127 HEDGEGROVE AVE	
	Satellite Beach, FL 32937	
ABSSACE	NAME OF THE PROPERTY OF THE PR	
<i>ARTICLE VIII</i> Effective date, i	EFFECTIVE DATE: f other than the date of filing:	. (OPTIONAL)
(If an effective filing.)	date is listed, the date must be specific and ea	unot be more than five days prior or 90 days after the
2.		
Note: If the dat the document's	e inserted in this block does not meet the applic effective date on the Department of State's reco	able statutory filing requirements, this date will not be listed as
	erroom to take on the peparanent of Ame 3 (ce)	us.
Having been na this certificate, I	med as registered agent to accept service of pro am familiar with and accept the appointment a	ocess for the above stated corporation at the place designated in s s registered agent and agree to act in this capacity
	dorum, a every	10/30/2019
	Required Signature/Registered Agent	Date
submit this do locument to the	cument and affirm that the facts stated herein Department of State constitutes a third degree f	are true. I am aware that the false information submitted in a elelony as provided for in s.817.155, F.S.
/	THURN, O EMPLY	10/30/2019
Requ	Intel Signature/Incorporator	Date