

# P22000093868

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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H220004309183ABCS

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

From:  
Account Name : CAPITOL SERVICES, INC.  
Account Number : I20160000017  
Phone : (855)498-5500  
Fax Number : (800)432-3622

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**ABSOLUTE SOLAR INC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

DS

## COVER LETTER

H22000430918

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

SUBJECT: Absolute Solar 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: Jesse DnberKoe  
Name (Printed or typed)

127 Yacht Club Way 306  
Address

Hypoluxo FL 33462  
City, State & Zip

(561) 667-5965  
Daytime Telephone number

J-Dabs@hotmail.com  
E-mail address: (to be used for future annual report notification)

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

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

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**ARTICLE I NAME**

The name of the corporation shall be: Absolute Solar Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address  
1818 S Australian Avenue Ste 100  
West Palm Beach FL 33409

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Provide Solar Sales and Installation  
Services

**ARTICLE IV SHARES**

The number of shares of stock is: 2

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

Name and Title:	<u>Jesse Daberkoe</u>	Name and Title:	<u>Javier Infesta</u>
Address	<u>127 Yacht Club Way 326</u>	Address:	<u>13796 Doubletree Trl</u>
	<u>Hypoluxo FL 33462</u>		<u>Wellington FL 33414</u>
	<u>Managing Member</u>		<u>Managing Member</u>

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: H22000430918  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Jesse Daberkow  
Address: 1818 S AUSTRALIAN AVE Ste 100  
West Palm Beach FL 33409

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Jesse Daberkow  
Address: 1818 S AUSTRALIAN AVE Ste 100  
West Palm Beach FL 33409

**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 days prior or 90 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*

\_\_\_\_\_  
Required Signature/Registered Agent  
Date 12/9/22

*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.*

\_\_\_\_\_  
Required Signature/Incorporator  
Date 12/9/22