## Panoralia Leffe 64799

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

P. O. Box 6327 Tallahassee, FL 32314				
SUBJECT: D.C.O. Home Inspections NC.  (Proposed corporate name - must include suffix)				
		•	10000224 -07/24/97 ****131.7	01066023
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :				
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	]
FROM: David C O'Connell Ja  Name (Printed or typed)				
6211 NW 38 Dr. 2 2 7				
Coral Springs FL 33067  City State & Zip				
City State & Zip  954 - 346 - 527/  Daytime Telephone number				

JUL 28 4; B5B

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

FILED

## ARTICLES OF INCORPORATION

97 JUL 24 AM 10: 04

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

TALL TO LORIDA

ARTICLE I NAME

The name of the corporation shall be:

D.C.O. Home Inspections, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

6211 NW 38 DA. Coral Springs FL 33067

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 @ \$100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

David C.O. Connell JR 6211 NW 38 Dr. Coral Springs FL 33067

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Davide O'Connell dr. 6211 NW. 38 Dr. Coral Springs Fl 33067

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Acent

Date