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DIVISION OF CORPORATIONS

98 OCT -8 AMII: 02

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

SUBJECT:	DMR CONSULTING, INC.	ate name - must include suf	fix)	<u> </u>
	(Proposed corpor	ate flame " filest filesees sur		
		· E	300002659 -10/08/98-1 *****78.75	1268 01066001 *****78.7
Enclosed is an origin	al and one(1) copy of the article	es of incorporation and a	a check for :	•
☐ \$70.00 Filing Fee	△ \$78.75		☐ \$131.25 Filing Fee,	
		ADDITIONAL CO	OPY REQUIRED	
FROM	DAVID W. HOSE Name (Pr	KINS rinted or typed)		.
		COURT		
	A	Address	:	
		Y, FL 32405 State & Zip		
		3552 X233	<u> </u>	
	Daytime T	elephone number	-	

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



ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

DMR CONSULTING, INC.

ARTICLE II PRINCIPAL OFFICE

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

3135 LAWTON COURT PANAMA CITY, FL 32405

SHARES ARTICLE III

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

DAVID W. HOSKINS 3135 LAWTON COURT PANAMA CITY, FL 32405

<u>INCORPORATOR</u>

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

DAVID W. HOSKINS 3135 LAWTON COURT PANAMA CITY, FL 32405

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 Agent