

PA 90000675083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

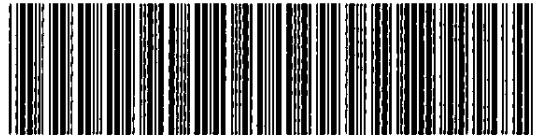
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09 SEP -8 AM 11:38
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

MRS 9/9

COVER LETTER

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

SUBJECT: FACTORY DIRECT TRANSMISSIONS, 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: JOHN MASZY
Name (Printed or typed)

12181 WINDERMERE CROSSING CIR
Address

WINTER GARDEN FL 34787
City, State & Zip

Daytime Telephone number

JMASZY@ADL.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)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

FACTORY DIRECT TRANSMISSIONS INC

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1203 E. ALTAMONTE DRIVE

Altamonte Springs, Florida 32701

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR PROFIT

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

JOHN R MASZY President

Holly A MASZY Secretary

ARTICLE VI REGISTERED AGENT

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

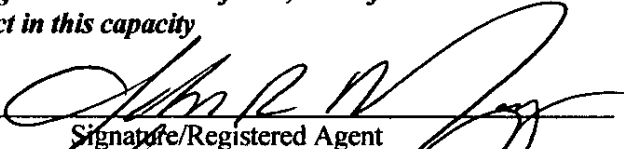
JOHN R MASZY
12181 WINDERMERE CROSSING CIRCLE
WINTER GARDEN, FL 34787

ARTICLE VII INCORPORATOR

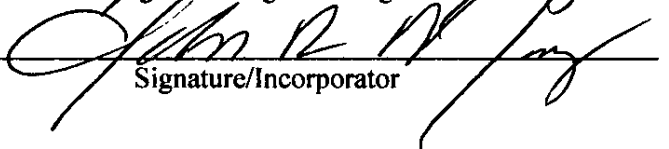
The name and address of the Incorporator is:

JOHN R MASZY
12181 WINDERMERE CROSSING CIRCLE
WINTER GARDEN, FL 34787

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


Signature/Registered Agent

9-1-09
Date


Signature/Incorporator

9-1-09
Date