P000000009020

(Proposed corporate name - must include suffix)

0000003112690----01/27/00--01028--001

000003112690--7 -01/27/00--01050--001 *****28.75 ******28.75

*****50.00 ****50.00

DGL & ASSOCIATES INC

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

Enclosed is an original and one(1) copy of the articles \$70.00	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM: DGL & ASSOCIATION	inted or typed)	ŢĮ.	.00 JAN 27	
	7961 NORMANDY BIVD PMB# 14			
JACKSONVILLE F	\. 3222) State & Zip	OF SIAIL FLORIDA	AM 10: 33	
904-771-5709				

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

Daytime Telephone number

B-00

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.

The name of the corporation shall be: DGL & ASSOCIATES INC.

ARTICLE II PRINCIPAL OFFICE

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

7961 NORMANDYBIVD PMB# 14

TACKSONVILLE, Fl. 32221

ARTICLE III SHARES

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

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

GIBERT Alvelo

(EO

7844 GREGORY DR. # 1005 JACKSONVILLE, Fl. 32210

ARTICLE V INCORPORATOR

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

GILBERT Alvelo

Signature/Incorporator

7844 GREGORY DR # 1005

JACKSON VILLE, FI 32210

DANNY Alvelo PRES!

5959 FT. CAROLINE RD.

SAX, FL. 32277

LENNY A VETO V. PRES. 8963 ROCKPOND MEADOWS DR

(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