2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000017741

WILMINGTON, DE 19808

City-St-Zip:

FILED Oct 05, 2006 Secretary of State

Entity Na	me: DLM PRO	PERTIES, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
927 CORNWALL ROAD SANFORD, FL 32773			915 CORNWALL ROAD SANFORD, FL 32773		
Current Mailing Address:			New Mailing Address:		
927 CORNWALL ROAD SANFORD, FL 32773			915 CORNWALL ROAD SANFORD, FL 32773		
FEI Number	: 59-3628506	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
MARGARI 456 SOUT	N, MARGARET ET A. WHARTO TH CENTRAL A FL 32765 US	DN, P.A.			
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE: MARGAR	ET A. WHARTON, P.A.			
	Electron	ic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did no I Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () DIOTTAVIO, AN 1563 LAFAYET GLADWYNE, P.	TE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () LUPO, ANTHON 891 ROYALWO OVIEDO, FL 32	OD LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () MOLLER, GLEN 820 SILVERWO LAKE MARY V,	OOD DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DST (X) SORENSEN, SA		Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: GLEN R. MOLLER VΡ 10/05/2006