POOQUOZIECZ TRANSMITTAL LETTER

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314

SUBJECT:

DMB, INC.

00 MAR -1 AM 10: 24
SECRETARY OF STATE

Enclosed please find an original and one (1) copy of the Articles of Incorporation for the above corporation and check in the amount of \$78.75.

FROM:

DAVID M. BELLUCCI

1449 Heartwellville Drive Palm Bay, FL 32907 **800003141978**--3 -02/21/00--01131--006 *****78.75 *****78.75

N-5°27

(رج





February 23, 2000

DAVID M. BELLUCCI 1449 HEARTWELLVILE DRIVE PALM BAY, FL 32907

SUBJECT: DMB, INC.

Ref. Number: W00000005027

We have received your document for DMB, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6928.

Tim Burch Document Specialist

Letter Number: 000A00009877

FILED

00 MAR - 1 AM 10: 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

<u>OF</u>

DMB. INC.

DMB ENTERPRISES INC.

ONB 2/28/09

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

ARTICLE 1 - NAME

The name of the corporation shall be DMB, INC. DMB ENTERPRISES, INC. 2/28/100

ARTICLE 11 - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be 1449 Heartwellville Drive, Palm Bay, Florida 32907.

ARTICLE III - CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding is one thousand (1,000) shares.

<u>ARTICLE IV - INITIAL REGISTERED AGENT AND ADDRESS</u>

The name and address of the initial registered agent is David M. Bellucci, whose address is 1449 Heartwellville Drive, Palm Bay, Florida 32907.

ARTICLE V - INCORPORATORS

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

DAVID M. BELLUCCI

1449 Heartwellville Drive Palm Bay, Florida 32907

IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of 2000.

DAVID M. BELLUCCI

STATE OF FLORIDA COUNTY OF BREVARD

I HEREBY CERTIFY that on this day, before me, a Notary Public authorized to take acknowledgments in the State of Florida, the County named above, personally appeared DAVID M. BELLUCCI, to me known to be the person described as subscriber in and who executed the foregoing Articles of Incorporation, and acknowledged before me that he subscribed to those Articles of Incorporation.

WITNESS my hand and official seal in the County and State named above this ___) day of

-- 100 muz , 2000.

> NOTARY PUBLIC STATE OF FLORIDA

MY COMMISSION EXPIRES:

Deborah C. Wheeler
MY COMMISSION # CC672064 EXPIRES
December 10, 2001
BONDED THRU TROY FAIN INSURANCE, INC

DUB420-173-48-347-0

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

- 1. The name of the corporation is DMB, INC. DMB GNTERPRISES WC.
- 2. The name and address of the registered agent and office is

DAVID M. BELLUCCI 1449 HEARTWELLVILLE DRIVE PALM BAY, FLORIDA 32907

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

DATE

2-17-00