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

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SUBJECT:

Dettman-Fleming Properties, Inc.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee X \$78.75

Filing Fee

& Certificate

\$122.50

\$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Access Incorporation Services, Inc.

Name (Printed or typed)

21550 Oxnard Street, Suite 300

Address

Woodland Hills, CA 91367

City, State & Zip

(818) 592-4034

Daytime Telephone number

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

ARTICLES OF INCORPORATION

SECRETARY PH 4: 15 The undersigned incorporator, for the purpose of forming a corporation under the Florida A Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Dettman-Fleming Properties, Inc.

PRINCIPAL OFFICE ARTICLE II

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

108 S.E. 8th Ave.

Ft. Lauderdale, FL 33301

<u>ARTICLE</u> III

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

1000

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Greg Dettman

108 S.E. 8th Ave, Ft. Lauderdale, FL 33301

INCORPORATOR

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

Gannon Stride

21550 Oxnard Street, Suite 300

Woodland Hills, CA 913

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, Uhereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statitues relatives 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