

TRANSMITTAL LETTER

P000000032817

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

SUBJECT: D+E PROFESSIONAL SERVICES, Inc.  
(Proposed corporate name - must include suffix)

300003185593--2  
-03/27/00--01121--013  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Enclosed is 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-

EFFECTIVE DATE  
11-15-93

FROM: DONNA JONSSON  
Name (Printed or typed) 300003185593--2

317 STILLWATER COVE  
Address

Destin, FL 32541  
City, State & Zip

850.650.7807  
Daytime Telephone number

FILED  
00 MAR 27 AM 11:45  
STATE  
TALLAHASSEE, FLORIDA

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

CC  
3-21-00

**EFFECTIVE DATE**  
11-15-93

**CERTIFICATE OF DOMESTICATION**

**FILED**

00 MAR 27 AM 11: 42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, Donna Jonsson, President,  
(Name) (Title)

of D & E Services, Inc., a foreign Corporation,  
(Corporation Name)

in accordance with s. 607.1801, F.S. does hereby certify:

1. The date on which corporation was first formed was November 15, 1993.
  2. The jurisdiction where the above named corporations was first formed, incorporated, or otherwise came into being was Duluth, GA.
  3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was D & E Services, Inc.
  4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401, F.S. with this certificate is D & E Professional Services, Inc.
  5. The jurisdiction that constituted the seat, siege, social principal place of business or central administration of the corporation; or any other equivalent thereto under applicable law immediately prior to the filing of the Certificate of Domestication was Duluth, GA.
- 
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s.607.1801, F.S.

I am Donna Jonsson, President of D & E Services, Inc., and am authorized to sign this certificate of Domestication on behalf of the corporation and have done so this the 24<sup>th</sup> day of March, 2000.



(Authorized Signature)

**Filing Fee:**

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

INHS53 (1/100)

ARTICLES OF INCORPORATION

D & E Professional Services, Inc.

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

EFFECTIVE DATE  
11-15-93

ARTICLE I NAME

The name of the corporation shall be: D & E Professional Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

317 Stillwater Cove  
Destin, FL 32541

ARTICLE III PURPOSE

The purpose for which the corporation is organized is provide management, technological, and communications-related consulting services and to purchase and manage properties for rental.

ARTICLE IV SHARES

The number of shares of stock is 1,000.

ARTICLE V INITIAL OFFICERS/DIRECTORS

The names and addresses of the officers are:

Donna Jonsson, president, 317 Stillwater Cove, Destin, FL 32541  
Evert Jonsson, chief financial officer, 317 Stillwater Cove, Destin, FL 32541

ARTICLE VI REGISTERED AGENT

The name and Florida street address is:

Donna Jonsson, 317 Stillwater Cove, Destin, FL 32541

ARTICLE VII INCORPORATOR

The name and address of each incorporator is:

Donna Jonsson, 317 Stillwater Cove, Destin, FL 32541  
Evert Jonsson, 317 Stillwater Cove, Destin, FL 32541

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STATE OF FLORIDA  
TALLAHASSEE

.....  
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.

Donna Jonsson  
Signature/Registered Agent

3/21/00  
Date

Donna Jonsson  
Signature/Incorporator

3/21/00  
Date

[Signature]  
Signature/Incorporator

3/21/00  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA