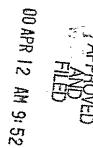
POCOCO 36813 Department of State

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

,				
SUBJECT:	onuldSon Enter	ate name - must include su	ffix)	
			000032054 -04/12/0001 *****80.00	425 1040 *****
Enclosed is an origin	nal and one(1) copy of the article	es of incorporation and a	check for:	
L. \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	5701 EMMA	inted or typed) Address	DEPAR 12 DEPAR 12 DIVISION OF COU	TO TO
X	850 - 591-	State & Zip S 456 Rephone number	AM 9:51 OF STATE REPORATIONS FLORIDA	A COUNTY OF THE PROPERTY OF TH
(1) /	*			

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



ARTICLES OF INCORPORATION

NAME

The name of the corporation shall be:

ARTICLE I

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

Donaldson Entel phise	-, INC
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 570/Emma Lun C Talluhussell, Florian, 323/4	• •
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at a	my one time is:
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDR. The name and Florida street address of the initial registered agent are: Benje Lawren Law 9411, F(1323/4) ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: Benje L Dougloson Stol Emma Lun Allumissel, Florida 323/4	AHPHOVED FILED FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA
Muy 1/2 - 12 - Signature/Incorporator Da	<u>2000</u>
(An additional article must be added if an effective date is requeste	ed.)

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

Date