

TRANSMITTAL LETTER

P00000095509

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

700003413637--1
-10/09/00--01093--018
*****78.75 *****78.75

SUBJECT: DPI MIAMI, 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

☒ \$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

FROM: HALINA ADAMSKA
Name (Printed or typed)

8905 RAMBLEWOOD DR, #2305
Address

CORAL SPRINGS, FL 33071
City, State & Zip

(954) 978-8868

Daytime Telephone number

FILED
00 OCT -9 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

T. Burch OCT 10 2000

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

DPI MIAMI, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8905 RAMBLEWOOD DR, # 2305
CORAL SPRINGS, FL 33071

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
THE TRANSACTION OF ANY OR ALL LAWFUL PURPOSES FOR WHICH A
CORPORATION MAY BE INCORPORATED UNDER THE FLORIDA BUSINESS
CORPORATION ACT

ARTICLE IV SHARES

The number of shares of stock is:

10,000 SHARES OF COMMON STOCK HAVING \$1.00 PAR VALUE PER
SHARE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

HALINA ADAMSKA
8905 RAMBLEWOOD DR, # 2305
CORAL SPRINGS, FL 33071

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

HALINA ADAMSKA
8905 RAMBLEWOOD DR, # 2305
CORAL SPRINGS, FL 33071

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

10/6/00

Date



Signature/Incorporator

10/6/00

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 OCT -9 PM 1:08

FILED