DO 1000006698 TRANSMITTAL LETTER

OI JAN 16 PM 12: 20

LL AHASSEE, FLORIDA

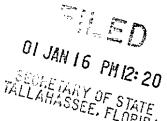
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314			W.C.LAHASSEE	<u></u>
SUBJECT:		TING , INC te name - must include suffi		_
2000035379 -01/16/01010 *****78.75 * Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate	☐\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL COPY REQUIRED		
FROM: _	JAMES SIN	1PSON ted or typed)		
-	77.1 SW South	h MACOdo Bluc dress	1	
- -	Port ST. L-UCIE, City, Sta	FLORIDA 3498 nte&Zip	83	

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

873-1818

Daytime Telephone number

ARTICLES OF INCORPORATION OF DLS PRINTING, INC.



The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I. NAME

The name of this corporation shall be: DLS PRINTING, INC.

ARTICLE II. INITIAL REGISTERED OFFICE AND MAILING ADDRESS

The street address of the initial registered office of this corporation is 767 SW SOUTH MACEDO BLVD., PORT ST. LUCIE, FLORIDA 34983

The mailing address of this corporation is 767 SW South Macedo Blvd., Port St. Lucie, Florida 34983.

ARTICLE III. CAPITALIZATION

The aggregate number of shares which the corporation is authorized to issue is 1,000. Such shares shall be of a single class, and shall have a par value of \$1.00 per share.

ARTICLE IV. INITIAL REGISTERED AGENT

The name and address of the initial registered agent is:

David Clark 767 SW South Macedo Blvd. Port St. Lucie, Florida 34983

ARTICLE V. INCORPORATOR

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

OLANIC PARCO **David Clark** 767 SW South Macedo Blvd. Port St. Lucie, Florida 34983 Date Signature/Incorporator 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. STATE OF FLORIDA **COUNTY OF ST. LUCIE** The foregoing instrument was acknowledged before me this day of JANUNAY, 2001 by DAVID CLARK is personally known to me or who has produced as identification and who did not take an oath.

Print Name:

Notary Public

Iames C. Simpson
Commission # CC 774532
Expires SER 13, 2002
BONDED THRU
ATLANTIC BONDING CO., INC.