

TRANSMITTAL LETTER

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

PO 1000023806

SUBJECT: DJE VENTURES, INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200003810668--0  
-03/07/01--01064--023  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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: J. ELIZABETH FOWLER  
Name (Printed or typed)

25 TWISTED PINE TRAIL  
Address

SRB, FL 32459  
City, State & Zip

(850) 267-2643  
Daytime Telephone number

DIVISION OF CORPORATION

01 MAR -7 PM 1:48

RECEIVED

01 MAR -7 PM 1:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

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

**ARTICLES OR INCORPORATION**

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

ARTICLE I Name

The name of the corporation shall be: DJE VENTURES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

25 Twisted Pine Trail  
Santa Rosa Beach, Fl 32459

ARTICLE III SHARES

The number of shares of stock is: 1000

ARTICLE IV INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address (es):

Delia Fowler  
Betsy Fowler  
25 Twisted Pine Trail  
Santa Rosa Beach, Florida 32459

ARTICLE V REGISTERED AGENTS

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

Delia FOWLER  
25 Twisted Pine Trail  
Santa Rosa Beach, Florida 32459

ARTICLE VI INCORPORATOR

The name and address of the Incorporators are:

Delia and or Betsy Fowler  
25 Twisted Pine Trail  
Santa Rosa Beach, Florida 32459

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 MAR -7 PM 1:51

APPROVED  
AND  
FILED

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above named 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.*

Delia B Fowler      3/7/01  
Signature/Registered Agent      Date

\_\_\_\_\_  
Signature/Registered Agent      Date

Delia B Fowler      3/7/01  
Signature/Incorporator      Date

Betsy Fowler      3/7/01  
Signature/Incorporator      Date