TRANSMITTAL LETTER

P0100032669

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

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CHID HECTE.	DLC MANAGEMENT (CORP ·	
SUBJECT:	(PROPOSED CORPORA	TE NAMĖ – <u>MUST INCLU</u>	JDE SUFFIX)
		3. 4 €	· Company
Englaced is an origina	al and one(1) copy of the article	es of incomporation and a	check for
Enclosed is an origina	it and one(1) copy of the article	es of incorporation and a	OHOOK TOT .
\$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 PY REQUIRED
FROM:	ANTHONY LEON	L	<u> </u>
	Name (P	rinted or typed)	
	45 Central Ct		01 SF TA
	-	Address	CRR M
	Tarpon Spring	•	MAR 26
	City,	State & Zip	2
	(727) 942-0330	~	35
	Daytime T	elechone number	

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

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:

DLC MANAGEMENT CORP

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SECRETARY OF STATE TALLAMASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:
45 CENTRAL CT
TARPON SPRINGS FL 34689

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in any activities or business permitted under the laws of the United States and of the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):
Anthony Leon, Pres

45 Central Ct Tarpon Springs Fl 34689 Jim Day, Secy/Treas 1415 Nature Ct Dayton OH 45440

ARTICLE VI REGISTERED AGENT

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

Anthony Leon 45 Central Ct Tarpon Springs F1 34689

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Aileen Delehanty 7300 Mackerel Ln Hudson Fl 34667

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 ANTHONY T. LEON

3/19/01

Date

3/19/01

Signature/Incorporator AILEEN DEAEHANTY

Date