Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : HUBCO

Account Number : 104662003400

Phone : (516)935-3940 Fax Number : (516)935-3088

FLORIDA PROFIT CORPORATION OR P.A.

D.J.M. Developments, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03 (4)
Estimated Charge	\$78.75

B. McKnigh. NOV 3 0 2001

ARTICLES OF INCORPORATION

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 the corporation shall be:

D.J.M. Developments, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

D.J.M. Developments, Inc.

606 Truman Avenue Key West FL 33040

> ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Mark Quinn

1013 Margaret Street Key West, FL 33040

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

HUBCO INCORPORATIONS

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ARTICLES V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Donal Morris 606 Truman Avenue Key West FL 33040

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

24th day of Oct 2001.

Donal Morris - Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation	is: D.J.M. Developments, Inc.	
2. The name and address of the re	gistered agent and office is:	
	Mark Quinn	
	Name	
	1013 Margaret Street	
	(P.O. Box or Mail Drop Box NOT Acceptable)	
	Key West, FL 33040	
	(City / State / Zip)	
agent and agree to act in this car	d agent and to accept service of process for the above s ted in this certificate, I hereby accept the appointment a pacity. I further agree to comply with the provisions of a lete performance of my duties, and am familiar with and istered agent.	s registered
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		FILI 01 NOV 30 SECRETARY TALLAHASSI
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Wel R Z) · · · —
Mark Quinn	October 24, 200)1
SIGNATURE	(Date)	