TRANSMITTAL LETTER

P02000000362

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



(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the art	ticles of incorporation and a c	checkefor JA
☐ \$70.00	Filing Fee & Certified Copy	Certificate of Status

FROM: Danny Hill Name (Printed or typed)	01-01-02
4485 Whispering Tallet Drive	
JACKSONVIlle FL B2277 City, State & Zip	
904-565-181/ Daytime Telephone number	e

900004747629--7 -01/02/02--01062--002 *****78.75 *****78.75

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of an S Incorporation, That shall have a beginning date of January 01, 2002.

ARTICLE I NAME

The name of the corporation shall be:

DANNY HILL INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and physical address of the corporation shall be:

4485 WHISPERING INLET DRIVE, JACKSONVILLE, FLORIDA 32277 Mailing address shall be:

4485 WHISPERING INLET DRIVE, JACKSONVILLE, FLORIDA 32277

ARTICLE III SHARES

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

01-01-02

500 SHARES

ARTICLE IV INITIAL REGISTERED AGENT

The name and Florida street address of the initial registered agent are:

PATTI HILL 4485 WHISPERING INLET DRIVE JACKSONVILLE, FL. 32277

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

DANNY J HILL 4485 WHISPERING INLET DRIVE JACKSONVILLE, FLORIDA 32277

Signature Incorporator

1/1/02 Date

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 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.

Date

Signature/Registered Agent

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