

# TRANSMITTAL LETTER

**P02000001360**

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

1/2/2002

SUBJECT: D T L PHOTOGRAPHY, INC.

100004746801--1  
-01/02/02--01035--019  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

FROM:

DIANE LEPAGE

Name (printed or typed)

545 WATERSIDE DR

Address

HYPOLUXO FL 33462

City, State & Zip

561 586 0504

Daytime Telephone number

FILED  
02 JAN -2 PM 2:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1-4-02  
WC

## 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 T L PHOTOGRAPHY, INC.

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### ARTICLE II PRINCIPAL OFFICE

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

545 WATERSIDE DR  
HYPOLUXO FL 33462

### ARTICLE III SHARES

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

is ## FIVE THOUSAND COMMON SHARES \$ 1.00 PAR VALUE #####

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DIANE LEPAGE  
545 WATERSIDE DR  
HYPOLUXO FL 33462

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

DIANE LEPAGE  
545 WATERSIDE DR  
HYPOLUXO FL 33462

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this  
2ND JANUARY 2002, 19  
day of

X *Diane Lepage*  
DIANE LEPAGE

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**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 DESIGNATING THE REGISTERED  
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

DETALIPHOTOGRAPHY, INC.

2. The name and address of the registered agent and office is:

DIANE LEPAGE

(NAME)

545 WATERSIDE DR.

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

HYDOLUXO FL 33462

(CITY/STATE/ZIP)

*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.*

*Diane Lepage*  
(SIGNATURE)  
DIANE LEPAGE

1/2/2002

(DATE)



Official Seal  
LEONARD A. LUTHER

Notary Public, State of Florida  
My Comm. Expires January 26, 2006  
#00079568

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

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