Department of State

Division of Corporation P. O. Box 6327	ıs					
Tallahassee, FL 32314						
SUBJECT:	Proposed corpo	Holdings, I	2000503 -03/04/02- *****78.7 <u>-<i>NC</i>,</u> dfix)			
	nd one(1) copy of the article	s 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			
		ADDITIONAL CO	PY REQUIRED			
FROM:	Robert N	Vittola				
Name (Printed or typed)						
	6542 Hypolyo Rd. #363					
	Lake Wa	oth, Florida 3 tate & Zip	3467			
	561-963	6195				

Daytime Telephone number

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 Incorporation.

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TALLAHASSE	AMII: 14
	C. FLORIDA

ART	ICLE	I	NA	ME

The name of the corporation shall be:

D.R.J. Holdings, Inc.

ARTICLE II PRINCIPAL OFFICE

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

6542 Hypolina Rd. #363 Lake Worth, FL, 33467

ARTICLE III SHARES

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

100 Shares. .

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Robert Nittele 6542 Hypolnyo Rd. #363 Lake Worth, FL. 33467

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Robert Nittole 6542 Hypolinio Rd. #363 Lake World, FL. 33467

Signature/Incorporator Date

(An additional article must be added if an effective date is requested.)

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.

Signature/Registered Agent Date