

P02000046620

TRANSMITTAL LETTER

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12:50:23 PM 02-29-06

APPROVED
AND
FILED

SUBJECT: DENT MAGIC, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00

Filing Fee

☒ \$78.75

Filing Fee
& Certificate of Status

☐ \$78.75

Filing Fee
& Certified Copy

☐ \$87.50

Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

Donald A. Foulke

Name (Printed or typed)

295 CANOPY ROAD

Address

MONTICELLO, FL 32344

City, State & Zip

(850) 556-7571

Daytime Telephone number

000005368990-17

-04/29/02--01062--029

*****78.75 *****78.75

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

✓

ARTICLES OF INCORPORATION

of

DENT MAGIC, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 APR 29 PM 12:50

APPROVED
AND
FILED

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation:

ARTICLE I.

NAME OF CORPORATION

The name of the corporation shall be: DENT MAGIC, INC.

ARTICLE II.

PRINCIPAL OFFICE

The initial principal place of business and mailing address shall be: 295 Canopy Road, Monticello, FL 32344

ARTICLE III.

SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV.

INITIAL REGISTERED OFFICE AND AGENT

The name and address of the initial registered agent is: Donald A. Foulke, 295 Canopy Road, Monticello, FL 32344

ARTICLE V.

INCORPORATORS

The name and street address of the incorporator to these Articles of Incorporation is: Donald A. Foulke, 295 Canopy Road, Monticello, FL 32344

The undersigned incorporator has executed these Articles of Incorporation this 28th day of April, 2002.

A handwritten signature in cursive script, appearing to read "Donald A. Foulke", written over a horizontal line.

Donald A. Foulke, as Incorporator

STATE OF FLORIDA

COUNTY OF LEON

PERSONALLY APPEARED before me, Donald A. Foulke, who acknowledged executing the above Articles of Incorporation.

Linda R. White

Notary Public
State of Florida
At Large

NOTARY PUBLIC - STATE OF FLORIDA
LINDA R. WHITE
COMMISSION # CC833044
EXPIRES 8/25/2003
BONDED THRU ASA 1-888-NOTARY1

Personally Known _____ OR Produced Identification Fi li

Type of Identification Produced Fi li
F420 181 534200

My commission expires:

**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: DENT MAGIC, INC.

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

DONALD A. FOULKE
(NAME)

297 CANOPY ROAD
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

MONTICELLO, FL 32314
(CITY/STATE/ZIP)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 APR 29 PM 12:50

APPROVED
AND
FILED

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.

Donald A Foulke
(SIGNATURE)

4-29-02
(DATE)

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